

Name of the Program	Contact name/First	Contact name/Last	Public or Private Organization or State Agency / Division / Office or Bureau	Email	Phone	Web Site	Address/Street Address	Address/Address Line 2	Address/City	Address/Postal / Zip Code	When did the program start?	What is the target population?	Names of other organizations involved	Please provide a brief description of the project	What are the expected or actual outcomes of the program?	What categories describe the program? Pick as many as apply.	Other categories?	In what settings is the program taking place?	Other settings?	Where is your program taking place?	Funding Source	Federal or state agency that is funding the grant	Approximate annual budget
National Governor's Association Learning Network on Improving Birth Outcomes	Denise	Smith	Office of Maternal, Child and Family Health, Perinatal and Women's Health	denise.a.smith@wv.gov	304-356-4397	www.wvdhhr.org/onch	350 Capitol Street, Room 427		Charleston			Application was submitted November 2012 The first stakeholders meeting was held July 25, 2013.	The target population for this Stakeholders group is maternity care providers, birthing hospitals and payers of maternity care services.	Those represented within the Stakeholders are: The Core Team is State Health Official, Dr. Letitia Tierney, Deputy Commissioner for Health Improvement, Anne Williams, Medicaid Director, Nancy Atkins, Medicaid Medical Director, Dr. James Becker, MCH/Title V Director, Christina Mullins, Governor's Office Representative, Chris Clark, GO HELP. Other stakeholders include: Dr. David Jude, OB/GYN Joan C. Edwards School of Medicine, Cabell Huntington Hospital, Dr. Williams Hollis, WVU School of Medicine, WVU Hospitals, Dr. Luis Bracers, WVU School of Medicine, CAMC, Women's and Children's Hospital, Amy Tolliver, Executive Director, West Virginia Perinatal Partnership, Dr. Brenda Dawley, past chair of West Virginia American College of Obstetrics and Gynecology, Vacant, Executive Director, March of Dimes, Alan Ducimans, WVU School of Public Health, Shauna Lively, West Virginia Association of Women's Health Obstrtric and Neonatal Nurses, Perry Bryant, West Virginias for Affordable Health Care, West Virginia State Medical Association, West Virginia Health Care Authority, West Virginia Hospital Association, Ted Cheatham, West Virginia Public Employees Insurance Agency, the Health Plan, Carelink, Unicare, Highmark Blue Cross Blue Shield.	The goal of the National Governor's Association Learning Network was to assist states in developing, implementing and aligning their key policies and initiatives related to the improvement of birth outcomes. West Virginia applied and was selected on the second round of opportunities. A total of 12 states participated in the Learning Network, 4 each round. West Virginia selected the topic of eliminating elective deliveries prior to 39 weeks gestation without medical indication. The strategy chosen was maternity payment reform. The core team requested technical assistance in evaluating the evidence-basis of maternity payment reform in reducing non-medically indicated deliveries prior to 39 weeks and assessing the potential impact on WV pregnancy outcomes. A stakeholders meeting was held July 25, 2012. The stakeholders identified multiple strategies during the workshop. These strategies were shared with WV DHHR to develop a draft action plan for maternity payment report. A follow-up meeting schedule for March 3, 2014 was cancelled due to inclement weather. A meeting is now being planned for late June.	The proposed outcomes for the West Virginia Learning Network are: 1) Maintain or further reduce the percent of elective inductions prior to 39 weeks gestation; and 2) Reduce the percent of elective C-Sections prior to 39 weeks gestation.	Cost Control, Education, Health Education, Hospital Services, Practice Transformation, Public Health, Quality Improvement, Quality Measurement		Medical Homes, Medical or Osteopathic School, Physician offices, Public Health, University	Statewide	The initial stakeholders meeting and follow-up conference of all the states participating was funded by the National Governor's Association and Maternal, Child and Family Health.	0	
GOHELP	Chris	Clark	Governor's Office of Health Enhancement and Lifestyle Planning (GOHELP)	Chris.R.Clark@WV.gov	304-558-0779	www.gohelp.wv.gov	One Davis Square, Suite 100		Charleston	25301	July 2009	Statewide effort to improve health of population through coordination of health policy among State agencies initiatives.	State agencies and public stakeholders	The mission of the Governor's Office of Health Enhancement and Lifestyle Planning (GOHELP) is to coordinate and facilitate State health system and policy initiatives by collaborating with state agencies and other public and private stakeholders. GOHELP - Serves as a resource to coordinate and facilitate evaluation of health policy activities and initiatives and assist with the coordination of implementation of federal, state and local health initiatives. - Promotes sharing and dissemination of effective strategies and programs that improve health outcomes. - Provides advice and recommendations on emerging health issues through the GOHELP Advisory Council and by convening stakeholder meetings. - Supports the objectives and initiatives of the Governor's Office related to health care delivery and health care service. - Supports and informs the work of GOHELP's constituent state and local agencies. - Convenes meetings of health stakeholders and the GOHELP Advisory Council to develop recommendations about health system improvements and health policies. - Offers recommendations to the Governor and state agencies regarding strategies that could make the state's health system more effective, timely, patient-centered and sustainable. - Collects advertising expenditure information from pharmaceutical labelers and manufacturers.	Expected: Effective coordination of State health policy initiatives by collaborating with state agencies and other public and private stakeholders.	Health Policy	State Agency	Statewide	Internal Funding	Governor's Office	250,000		
WVU Injury Control Research Center	Jeffrey	Coben	West Virginia University	jcoben@hsc.wvu.edu	304-293-6682	www.hsc.wvu.edu/wicrc/pages/	3606 Collins Ferry Rd		Morgantown	26505	2004	state violence and injury prevention programs; state, county, and local community injury prevention councils, boards and coalitions; other injury control research centers; injury prevention researchers and practitioners; policymakers; news media; general public		The mission of the WVU ICRC is to advance the science and practice of injury prevention and control through research, education, outreach and service. At the Center's core is a strong, interdisciplinary research program involving faculty who represent multiple colleges, schools, academic departments, centers, institutes and offices from across the University. ICRC faculty have demonstrable expertise in the disciplines of medicine, public health, health services research, sociology, nursing, communications, behavioral science, and biostatistics. All ICRC-affiliated faculty members also have primary academic appointments in relevant University departments. In addition to the WVU faculty, the ICRC maintains an expansive network of collaborating external faculty affiliates. As a comprehensive ICRC, the Center's overarching aims are to: 1) advance scientific discovery in injury prevention and control; 2) improve capacity of the injury field; 3) increase public awareness of the injury problem; and 4) strengthen injury prevention and control programs and policies. The WVU ICRC maintains a specific focus on populations residing not only in West Virginia and surrounding states, but also throughout the Appalachian Region. Several injury mechanisms contribute excessively to the injury disparities in West Virginia and the surrounding region. An understanding of these mechanisms has led our Center to focus our research on motor-vehicle-related injuries, unintentional drug overdoses and poisonings (largely resulting from prescription drug misuse and abuse), falls among the elderly, occupational injuries and violence, traumatic brain injury, suicide and self harm, and intimate partner violence, among other topics.	new research-based knowledge of injury risks and prevention; improved injury prevention programs; increased public awareness of injury issues; increased evidence-informed decisions, practices and policies; improved capacity among injury prevention professionals; reduced injury risks; reduced fatal and nonfatal injuries and rates; reduced injury-associated costs; new and enhanced injury prevention partnerships and collaborations	Prevention, Public Health, Research, Substance Abuse & Mental Health	injury prevention research injury prevention practice technical assistance and capacity building community engagement knowledge translation	Community, Public Health, University	Statewide	Federal Grant	Centers for Disease Control and Prevention	800,000	
WV Health Improvement Consortium	Jean	Kranz	WV Health Improvement Institute	jean.kranz@wvhealthimprovement.org	304-550-8680	http://www.wvhealthimprovement.org/	6354 US Route 60 East		Barboursville		February 2011	Pediatric Members in Medicaid and WV CHIP participants	WV Medicaid WV CHIP CSI Solutions	The West Virginia T-CHIC Collaborative will improve the health of children in WV as measured by select CMS core measures and meaningful use measures that reflect processes and outcomes of preventive and chronic illness care, and by claims data that reflect utilization of health care resources. The goal of the initiative will be to experience year over year improvement in all measures for the cohort as a whole. Specific measures to be used for the 3 year period are defined in the Collaborative's measurement strategy. Process measures include: • Well-child visits in the first 15 months of life • Well-child visits in the 3rd, 4th, 5th, and 6th years of life • Developmental screening • Weight assessment/ counseling • Preventive dental services • Dental treatment • Adolescent immunization status • HbA1c testing Outcome measures include: • Children classified as overweight • Children with uncontrolled diabetes Utilization measures include: • ED visits for children with asthma • ED visit rate • Inpatient hospitalizations Other measures include: • Practice NCOA score • Patient/ family feedback • Care team experience feedback Improvement will be accomplished by engaging providers and their care teams in a modified Breakthrough Series Collaborative process over the next three years that will provide the training and technical assistance needed for the practices to become PCMH recognized and to use IT in a meaningful way. The collaborative will also provide practices with a forum for sharing their experiences and learning from one another as they progress on their improvement journey. Practices will collect and report on the measures on a regular basis and will receive feedback on individual and aggregate cohort performance. Practices will also be provided with a care coordinator resource to augment their current care team and with access to a patient health record to enhance care team-patient engagement.	Improved quality outcomes for children that receive CHIP and Medicaid benefits.	Access to Care, Asthma, Care Coordination, Care Transitions, Children, Communications, Data Collection or Analysis, Diabetes, Disabilities, Disease Prevention, Education, EHR/HIE, Health Education, Health Promotion, Obesity, Oral Health, Patient Family Engagement, Pharmacy / Pharmacist Services, Physical Activity, Practice Transformation, Prevention, Quality Improvement, Quality Measurement, Technology, Telehealth, Wellness Programs	FQHC / RHC, Medical or Osteopathic School, Physician offices	Private pediatric practices Rural health clinics	Clay County, Fayette County, Greenbrier County, Jefferson County, Kanawha County, Nicholas County, Putnam County, Randolph County, Upshur County	Federal Grant	CMS		
Women's Reproductive Health Policy/Outreach/Education	Amy	Weintraub	WV FREE	amy@wvfree.org	304-342-9188	http://www.wvfree.org	PO Box 11042		Charleston	25339	1989	West Virginia women		WV FREE is a reproductive health advocacy and justice nonprofit organization working to improve education on reproductive options, increase access to affordable birth control, reduce teen pregnancy and improve adolescent health, and protect personal decision-making, including decisions about whether or when to have a child.	lower rate of unintended pregnancy, lower rate of teen pregnancy, increased access to care, increased rate of high school graduation, reduced number of West Virginians living in poverty	Access to Care, Care Delivery, Community Environment, Education, Health Education, Health Promotion, Public Health, Social Support Services	Family Planning Women's Health	Community, Public Health	Non Profit Organization	Statewide	Private Grant		
Rural Health Initiative	April	Vestal	West Virginia University Institute for Community and Rural Health	avestal@hsc.wvu.edu	304-276-0920	www.hsc.wvu.edu/wicrh	PO Box 9003		Morgantown	26506-9003	2010	Graduate and undergraduate students High School Students Health Science Schools & Programs at West Virginia University Health Sciences Center including Medicine, Nursing, Nurse	WV Higher Education Policy Commission WV Area Health Education Centers (WV AHEC)	The goal of the RHI Program at West Virginia University is to increase the recruitment and retention of health professionals to rural areas of West Virginia. Several programs are offered to meet this goal such as K-16 Pipeline programs in high schools, a rural health interest group for health sciences students, financial incentives for students in the form of scholarships in exchange for practice in a rural area, support to rural faculty to teach health professional students, housing for students across the state during their rural rotations, rural experiences that engage students in interprofessional activities and experiences, and quality rural rotations in rural clinics, private practices and hospitals throughout the state.	Recruitment and retention of health professionals in rural areas of WV	Education, Health Education, Health Promotion, Oral Health, Physician services, Prevention, Quality Improvement, Workforce		Community, FQHC / RHC, Free Clinics, Nursing School, Pharmacy, Pharmacy School, Physician offices, Secondary Schools, University	Statewide	State Grant	WV Higher Education Policy Commission	590000	
WVU School of Medicine Project MUSHROOM	Holly	Maroon	WVU SOM Project MUSHROOM	maroonh@wvuhhealthcare.com	304-598-6919	http://medicine.hsc.wvu.edu/famm-ed-mushroom/	1 Medical Center Drive	PO Box 9152	Morgantown	26506-9152	2005	Homeless population in Morgantown, WV.		This program brings together medical, nursing, dental, social work and other health professional volunteers on "street rounds". We go by foot to those places where we are needed most: along the rivers and creeks, down the back alleys of downtown, and under the bridges. Our goal is to reach out to those most marginalized from society. We help provide them with the basics of care including food, water, clothing, and basic medical intervention. More importantly, we offer a gentle hand, a warm smile, and a witness to their dignity as fellow human beings.		Public Health	Homeless outreach	Community	Streets of Morgantown, WV, Bartlett House homeless shelter.	Monongalia County			
WV State Health Insurance Assistance Program (WV SHIP)	Marcia	Meeks	WV Bureau of Senior Services	marcia.d.meeks@wv.gov	304-558-3317	www.wvship.org	1900 Kanawha Blvd., East		Charleston	25305	1992	Medicare beneficiaries regardless of age and their family members and caregivers.	Centers for Medicare & Medicaid Services (CMS); Administration for Community Living (ACL); Social Security Administration (SSA); Senior Medicare Patrol Aging & Disability Resource Centers County Aging Providers Area Agencies on Aging Cabell Huntington Hospital Camden Clark Hospital Charleston Area Medical Center Cabin Creek Health Center WV AARP Foundation Greenbrier Valley Regional Hospital Access Healthy Systems	WV SHIP has counselors located throughout the State as well as a call center located at the WV Bureau of Senior Services that answers WV SHIP's toll-free line. SHIP Counselors provide counseling on medicare Parts A, B, C, D and supplemental plans. WV SHIP also helps Medicare beneficiaries apply for programs that help with their Medicare costs such as the Medicare Savings Program and Extra Help Program.	To assist as many Medicare beneficiaries as possible and to provide accurate information in a way that can be easily understood.	Access to Care, Disabilities, Health Education, Health Literacy, Health Promotion	Medicare Insurance	Community, Home, State Agency	Call Center County Aging Providers	Statewide	Federal Grant	Administration for Community Living (ACL)	455,000

Title III-E Congregate Respite	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	2000	Consumers with Dementia, Alzheimer's ro other related diagnosis.	Alzheimer's Association	Title III-E of the Older Americans Act: Providers Alzheimer's Disease Support Groups, Counseling, information and Referral, Caregiver respite and in-home respite.	To provide a break for caregivers and support through resources, education and suport groups.	Alzheimers Disease, Education, Home Care, Wellness Programs	Community, Home	Berkeley County, Cabell County, Hancock County, Jefferson County, Kanawha County, Marshall County, Ohio County, Raleigh County, Wirt	Federal Grant	Administration for Community Living	226,993.19		
Title III-E In-Home Respite	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	2000	Consumers with dementia, Alzheimer's or other related diagnosis.	Alzheimer's Association	Title III-E of the Older Americans Act: Providers Alzheimer's Disease Support Groups, Counseling, Information and referral, Caregiver respite and in-home respite.	To provide a break for caregivers and support through resources, education and support groups.	Alzheimers Disease, Education, Home Care, Wellness Programs	Community, Home	Barbour County, Berkeley County, Boone County, Braxton County, Brooke County, Calhoun County, Clay County, Doddridge County, Fayette County, Gilmer County, Grant County, Greenbrier County, Hampshire County, Hancock County, Hardy County, Jackson County, Kanawha County, Lewis County, Lincoln County, Logan County, Marion County, Mason County, McDowell County, Mercer County, Mineral County, Mingo County, Monongalia County, Monroe County, Morgan County, Nicholas County, Pendleton County, Pleasants County, Pocahontas County	Federal Grant	Administration for Community Living	861,457.66		
Title III-D Evidence Based Wellness	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	Part of the Older Americans Act of the 1960s; redefined in 1972	WV Seniors over 60 years of age.	WV Public Health Chronic Disease Management	Title III-D is evidence based wellness programs that have been shown effective in improving health and are replicated and tested. Tiered in three levels based on effectiveness. Diseases: Heart, Osteoarthritis, range of motion, diabetes, chronic disease, balance, wellness, monitoring health fairs.	Assist Seniors to better manage disease.	Asthma, Diabetes, Disease Prevention, Education, Health Education, Health Literacy, Health Promotion, Obesity, Patient Safety, Physical Activity, Prevention, Wellness Programs	Community, Social Service Agency, State Agency	Statewide	Federal Grant	Administration for Community Living	197,624		
Title III-C-2 Nutrition Services	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	West Virginians 60+ at risk, isolated, frail elderly.	Four Area Agencies on Aging 48 County provider agencies Meals on Wheels Association of America County health departments (kitchen inspections)	Nutritionist lunch meals that meet 1/3 USDA Food Pyramid. Served throughout the Bureau's Network of County Based Senior Services Programs. C-2: Home Delivered (Meals on Wheels) Homebound, at risk Seniors and Ensure Nutritional Supplement can be used as meals.	C-2: Home Delivered, help remain in the home with nutritional meals.	Cardiovascular Disease, Diabetes, Disease Prevention, Food, Health Education, Health Promotion, Home Care, Obesity	Home, Social Service Agency	Statewide	Federal Grant, State Grant	Administration for Community Living; State of West Virginia	7,348,355			
Title III-C-1 Nutrition Services	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	1972	West Virginians 60+ at risk, isolated, frail elderly.	Four Area Agencies on Aging 48 County Provider Agencies Meals on Wheels Association of America County Health Departments (kitchen inspections)	Nutritionist lunch meals that meet 1/3 USDA Food Pyramid. Served throughout the Bureau's Network of County Based Senior Programs. C-1: Congregate Site meals for nutrition and socialization.	C-1: Congregate, healthy eating, better nutrition and socialization to prevent isolation and depression.	Cardiovascular Disease, Diabetes, Disease Prevention, Food, Health Education, Health Promotion, Obesity	Social Service Agency	Statewide	Federal Grant, State Grant	Administration for Community Living; State of West Virginia	5,226,704		
Title III B Homemaker Services	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	1965	WV Seniors 60 years of age and over.	Area Agencies on Aging County Aging providers	To provide assistance to persons having difficulty with one or more of the following seven instrumental activities of daily living: preparing meals, shopping for personal items, medication management, managing money, using the telephone, doing heavy housework. The former services Housekeeping and Shopping are now included in this definition. Housekeeping involves house cleaning, laundry and meal preparation. Shopping involves assistance in obtaining food, clothing, medical supplies and household items for seniors confined to their homes/places of residence. Homemaker does not require a care plan. If the senior is capable of going with the provider to obtain needed supplies, Homemaker would not be the service provided.	For Seniors to remain in their homes.	Care Delivery, Diabetes, Food, Home Care, Oral Health, Patient Safety, Physical Activity	Home	Barbour County, Boone County, Cabell County, Clay County, Doddridge County, Gilmer County, Marion County, Mineral County, Monroe County, Morgan County, Preston County, Randolph County, Taylor County, Tucker County	Federal Grant	Administration for Community Living	384,804.33		
Title III-B CHORE	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	1965	Wv Seniors over 60 years of age.		Chore Services are defined as the performance of household chores such as heavy cleaning (moving furniture, turning mattresses), and yard and walk maintenance, which the client is unable to handle on his/her own. This services does not require the services of a trained homemaker or other specialist, nor does it require a care plan. Chore services are provided by some county aging providers using LIFE funding under the Older Americans Act. Please check with the county aging provider in your county to see if Chore services are offered.	For Seniors to be able to maintain their home or stay in their rental unit.	Housekeeping+	Home	Pendleton County, Taylor County	Federal Grant	Administration for Community Living	21,359		
Title III-B of Older Americans Act	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	1965	Citizens over 60 years of age.		Title III-B covers Senior Center operations, informational nd assistance, group activities and the priority services of Chore, homemaker and personal care. The services through the Bureau's County Based provider network and are offered in County as per priority need in the specific county. A separate sheet is being completed for the priority services. Chore Services, homemaker, personal care, respite in-home, congregare respite, transportation.	Senior Center operations and group activities.	Access to Care, Community Environment, Disease Prevention, Education, Health Education, Health Literacy, Health Promotion, Physical Activity, Prevention, Social Support Services, Wellness Programs	Community, Social Service Agency	Statewide	Federal Grant	Administration for Community Living	3,242,561.33		
Title III-B Transportation	Robert	Roswall	WV Bureau of Senior Services	robert.e.ros wall@wv.gov	304-558-3317	www.wvsenior services.gov	1900 Kanawha Blvd., East	Charleston	25305	1965	WV Seniors 60 years of age and over.	Area Agencies on Aging County Aging Providers	To provide a vehicular means of transportation for a person who requires help in going from one location to another, does not include any other activity. Transportation to each destination is considered a unit. Recreational travel cannot be counted. Assisted Transportation; Hands on Transportation; Walking consumer from door to vehicle and from vehicle to appointment and home.	That seniors in every county will have transportation to the doctor, the senior center and the grocery store.	Access to Care, Community Environment, Disease Prevention, Food, Physician services, Social Support Services	Transportation	Community	Statewide	Federal Grant, State Grant	Administration fro Community Living	2,836,398	
WVSOM Healthy Children's Initiative	Michael	Adelman	West Virginia School of Osteopathic Medicine	madelman@o steo.wvsom.e du	304-647-6200	www.abracadabr a.org	400 North Lee Street	Lewisburg	24901	2010	Children ages 4 to 10	WV Public Broadcasting	WVSOM's Healthy Children's Initiative is composed of Four Elements: Abracadabra, the PBS Television Series, online activities including our abracadabra website, live events, and publications. There are currently 40 episodes of Abracadabra which have achieved strong ratings. This has elevated conversations about children's health and nutrition among influential viewers. Special Guests who participated in various episodes for season three included West Virginia's First Lady, Joanne Tomblin, President of Southern West Virginia Community College, Gayle Manchin, President of the WV Board of Education; and Gregory Burton, President and CEO of Brickstreet Insurance. New outreach efforts into schools and non-profit agencies around the state allowed WVSOM to further connect with young audiences on the issues of health and wellness. Educational concepts have been developed to address childhood health, science, and other themes, with supporting materials distributed to West Virginia school teachers, librarians, and other educators who may incorporate the show's messages into their classroom. The Abracadabra website, along with activity books and other publications allow children to explore their imaginations while learning about health and nutrition and science.	To improve the health of West Virginia's children To improve the health of West Virginia's parents through feedback from their children on the importance of eating healthier and making health choices-not only with food, but also with lifestyle choices. To empower children to make healthier choices. To excite children about science.	Behavioral Health, Children, Communications, Diabetes, Disease Prevention, Education, Food, Health Education, Health Literacy, Health Promotion, Obesity, Oral Health, Physician services, Prevention, Public Health, Research, Wellness Programs	Community, Elementary Schools, Home, Medical or Osteopathic School	Statewide	State Grant, Private Grant, Internal Funding	Arts and Educatio			
West Virginia Asthma Education and Prevention Program	Jessica	Wright	DHHR/OCHSHP/BPH	jessica.g.wrig ht@wv.gov	304-556-4193	www.wvasthma .org	350 Capitol Street	Charleston	25301	2001	All citizens in West Virginia. Priority disparate populations identified are children, adult women, seniors (>64 years), and low socio- economic status individuals.	WV Division of Health Promotion & Chronic Disease WV Department of Education WV Office of Maternal Child and Family Health WV Division of Tobacco Prevention Charleston Area Medical Center WVU-Office of Health Services Research American Lung Association in WV WV Division of Radiation Toxics and Indoor Air WV Division of Primary Care WV Division of Local Health WV School-based Health Assembly Cabin Creek Health System Northern Greenbrier Health Center Ranelle Medical Center New River Health Center Coordinated School Public Health Program (CSPHP) - School Health Program University of Charleston School of Pharmacy WVU School of Pharmacy Carver Career Center/Bridgemont Community and Technical College - Respiratory Therapy Program Marshall Univ./St. Mary's School of Respiratory Therapy Program Wheeling Jesuit University Respiratory Therapy Program WVU-School of Nursing	The West Virginia Asthma Education and Prevention Program (WVAEPP) is working to ensure that all of the state's asthma education and prevention organizations - from state government programs to non-profits - are working together to educate individuals using the same message on -early diagnosis, treatment per national clinical guidelines, improved instruction on using and for the need of medication, education on recognizing and avoiding asthma triggers, and improving the quality of life for those affected by asthma. WVAEPP is working to increase cooperation between asthma health-related programs and organizations throughout the state. By joining forces, our goal is to improve access to reliable information and resources while promoting education and improved adherence to the guidelines from the National Heart, Lung, and Blood Institute (NHLBI) and the National Asthma Education and Prevention Program (NAEPP).	Decrease the burden of asthma on the citizens of the state.	Access to Care, Asthma, Care Coordination, Care Delivery, Children, Community Environment, COPD, Data Collection or Analysis, Disease Prevention, Disease Treatment, EHR/Registries, EHRs, Health Education, Health Literacy, Health Promotion, Hospital Services, Integration of services, Medical Devices, Medical Homes, Patient Family Engagement, Prevention, Public Health, Quality Improvement	Public Awareness Self- Management Access to Care, Quality of Care Environmental - Indoor Air, etc.	Allied Health Program, FOHC / RHC, Free Clinics, Hospital, Medical Homes, Pharmacy School, Public Health, Secondary Schools, State Agency, University	School-based Health Centers Respiratory Therapy Programs Respiratory Care/Pulmonary Rehab Departments	Statewide	Federal Grant	Centers for Disease Control and Prevention	350,000
WVU Academic PCMH Fellowship in Family Medicine	Karen	Fitzpatrick MD	West Virginia University Dept of Family Medicine	fitzpatrickk@ wvuhealthcar e.com	304-598-6900	http://medicine.h sc.wvu.edu/famf ellowship/Acad emic-PCMH- Fellowship-in- Family-Medicine	PO Box 9152 Health Sciences	Medical Center Drive	Morgantown	26506	2014	Training program for PCMH physician leadership for West Virginia	This one year academic post-residency fellowship program for Family physicians is designed to train physicians in Patient-centered medical home practice transformation. Fellows will participate in planning and team-building, learn practice-based population health concepts and quality improvement approaches. They will develop and carry out quality improvement projects with practice population. Fellows will network with regional PCMH efforts in order to form collaborations for practice redesign. The fellow will become eligible for the NQQA PCMH Content expert certification and will work with WVU Healthcare practices to assist toward NQQA recognition. The fellow will also serve as junior faculty in our academic Family Medicine residency training program, gaining leadership training and building teaching skills as they supervise residents and students. The fellow will participate in PCMH curriculum development for family medicine residents, medical students and pharmacy students.	The fellowship will produce one fellow per year with advanced Patient centered medical home expertise and with leadership and team-building training.	Care Coordination, Care Delivery, Care Transitions, Cost Control, Disease Prevention, EHR/Registries, Integration of services, Medical Homes, Public Health, Quality Improvement, Quality Measurement, Workforce	Medical Homes, Physician offices	Monongalia County	Private Grant, Internal Funding		150,000		

Patient Centered Medical Home Fellowship Program	Dana	King	WVU Department of Family Medicine	kingdana@wvuhealthcare.com	304-598-6920	http://medicine.hsc.wvu.edu/fammi dr ed/Education/Academic-PCMH-Fellowship-in-Family-Medicine	1 Medical Center	Morgantown	26506	2014	Family physicians who have completed residency who wish to pursue training and build expertise in medical home development and practice transformation.	WVU Family Department of Family Medicine	The fellowship is a one-year, full-time faculty development fellowship designed to create physician leaders in primary care practice improvement and transformation to PCMH model of care. WVU Department of Family Medicine has been engaged in practice transformation since January 2012 and works collaboratively with affiliated practices at various stages of PCMH development. The rich academic environment of the department and the institution provides valuable opportunities for experiential learning in practice transformation leadership. Goals of the Fellowship --Acquire skills to develop, evaluate, teach and lead practice improvement. --Acquire applicable knowledge and experience regarding PCMH transformation in an active PCMH environment. --Acquire expertise regarding primary care practice requirements for attaining NCQA PCMH Recognition.	Goals Acquire skills to develop, evaluate, teach and lead practice improvement. Acquire applicable knowledge and experience regarding PCMH transformation in an active PCMH environment. Acquire expertise regarding primary care practice requirements for attaining NCQA PCMH Recognition. Outcomes -- Achievement of recognition by NCQA as an Expert in medical homes --Achieve the capability to redesign practices including practice improvement and medical home recognition for the practice.	Access to Care, Care Coordination, Cost Control, Disease Prevention, Disease Treatment, Engaging Employers, Health Education, Health Promotion, Integration of services, Obesity, Patient Family Engagement, Pharmacy / Pharmacist Services, Physical Activity, Physician services, Practice Transformation, Prevention, Public Health, Quality Measurement, Research, Applied	Community, FQHC / RHC, Medical Homes, Medical or Osteopathic School, Physician offices	Monongalia County	Internal Funding				
Coronary Artery Risk Detection In Appalachian Communities (CARDIAC) Project	William	Neal	WVU Pediatrics	wneal@hsc.wvu.edu	304-293-2416		CARDIAC Project	Robt. C. Byrd Health Sciences	Morgantown	26506	1998	Youth and families in every WV community. It has become the largest comprehensive school-based surveillance and intervention program of its kind in the nation.	WVDHHR; Department of Pediatrics, WVU; College of Physical Activity and Sports Science, WVU; Highmark Foundation; Familial Hypercholesterolemia (FH) Foundation; Marshall University; Concord University; WV Department of Education.	CARDIAC is a school-based chronic disease risk factor surveillance, intervention, and research project conducted in all 55 WV counties. Comprehensive risk factor screening is offered to nearly all 5th grade students in the state, consisting of family history of heart disease and diabetes, measurement of height/weight to calculate BMI, BP and fasting lipid profile (total, LDL, HDL, and triglycerides), rash of Acanthosis Nigricans (AN), and glucose/insulin levels if AN positive. To date over 80,000 5th graders have been tested. Active parental consent is required. Additionally, selective kindergarten and second grade students have BMI measured by passive parental consent in order to have longitudinal assessment of risk status. Interventions have been individualized (Camp NEW You), school-based (Active Academics, McDowell and Greenbrier county CHOICES Projects), and statewide (WV Physical Activity Plan) Research (see below)	Modest improvement in weight status among WV youth with a 3.5% decline in obesity among kindergarten students; 3.0% decline in BP among 5th graders; and an impressive 10mg/dL decline in LDL blood cholesterol level over the past decade. CARDIAC data is available to all in aggregate form and has been used extensively by a variety of individuals and organizations seeking grant funding for health and wellness.	Asthma, Behavioral Health, Cardiovascular Disease, Care Coordination, Children, Communications, Community Environment, Diabetes, Disease Prevention, Disease Treatment, Education, Food, Health Education, Health Literacy, Health Promotion, Local Government, Medical Homes, Obesity, Oral Health, Patient Family Engagement, Physical Activity, Physician services, Practice Transformation, Prevention, Public Health, Quality Improvement, Quality Measurement, Research, Research, Applied, Technology, Wellness Programs, Workforce	Health Sciences education; primary/secondary education	Community, Elementary Schools, FQHC / RHC, Home, Hospital, Local Health Department, Medical Homes, Medical or Osteopathic School, Physician offices, Public Health, Secondary Schools, State Agency, University	Primarily schools	Statewide	State Grant, Internal Funding	400,000
Southeastern Area Health Education Center	Angela	Alston	Southeastern Area Health Education Center	aalston@oste.o.wvson.edu	304-293-6867	http://www.wvson.edu/Programs/AHEC	400 North Lee Street	Lewisburg	24901	December, 2002	K-16 Economically disadvantaged and underrepresented minority students. Primary care residents and students in medicine, nursing, nursing practitioner and physician assistant programs, dentistry, dental hygiene, pharmacy programs, physical therapy, and medical laboratory science. Health care professionals, especially those practicing in rural and underserved areas.	West Virginia School of Osteopathic Medicine Mountain State OPTI WV AHEC Program Office US Dept. of Health & Human Services - HRSA WVU Institute for Community and Rural Health National AHEC Organization WV Geriatric Education Center New River Health Association Rural Health Initiative Rural Outreach	The Southeastern Area Health Education Center's (SE-AHEC) mission is to advocate for quality primary and preventative healthcare delivery to rural underserved populations through academic and community collaboration in order to improve the distribution of health care professionals to where they are needed most. SE-AHEC is one of five regional AHEC centers within the state of West Virginia covering the following nine counties: Fayette, Greenbrier, Nicholas, Mercer, Monroe, Pocahontas, Raleigh, Summers, and Webster. SE-AHEC's state and local partnerships enable the center to achieve its mission through community placements (rotations) and clinical experiences for medical, dental, physician assistant, nursing, pharmacy, and allied health students and residents. The center also provides sponsorship of interprofessional team (IPT) experiences that focus on graduate primary care education through a seamless integration of postgraduate and undergraduate health professions training through team-developed public health interventions that are service-based, prevention-oriented, and community-focused. Additionally, the Center oversees the coordination and support of health careers recruitment programs for K-16 students, working within elementary and secondary school systems and health professions pipeline programs such as Health Occupations Students of America (HOSA) and the Health Sciences and Technology Academy (HSTA). Moreover, SE-AHEC provides accredited continuing medical education offerings and professional support for health care professionals, especially those practicing in rural, underserved areas. These programs are designed to enhance clinical skills, help maintain professional certifications, and address health care workforce needs in regard to recruitment, placement, and retention. SE-AHEC collaborates with its academic and community partners to continually evaluate and identify the health needs of its region, gather resources, and build programs to address those needs. For a list of accomplishments for 2012-2013 and 2013-2014, please see the attached documents.	1. Introduce health profession careers and/or academic enhancement to K-16 students with an emphasis on high schools from a minority population or underserved areas. 2. Provide health professions students and residents with clinical experiences in community-based settings with an emphasis on rural and underserved settings. 3. Promote the optimal use of the healthcare workforce and improve quality of care delivered through interprofessional collaboration. 4. Strengthen the existing healthcare workforce in rural and underserved areas and support the retention of community-based health professionals. For actual outcomes, please see the attached summaries of accomplishments.	Access to Care, Alzheimers Disease, Asthma, Autism, Behavioral Health, Behavioral Health Integration, Cardiovascular Disease, Care Coordination, Care Delivery, Care Transitions, Children, Communications, Community Environment, COPD, Diabetes, Disabilities, Disease Prevention, Disease Treatment, Education, End of Life care, Food, Health Education, Health Literacy, Health Promotion, Home Care, Home Monitoring, Hospital Services, Integration of services, Long term care services, Obesity, Oral Health, Patient Family Engagement, Patient Safety, Pharmacy / Pharmacist Services, Physical Activity, Prevention, Public Health, Social Support Services, Substance Abuse & Mental Health, Wellness Programs, Workforce	Allied Health Program, Community, Elementary Schools, FQHC / RHC, Free Clinics, Hospital, Local Health Department, Medical or Osteopathic School, Nursing Home, Physician offices, Secondary Schools, University	Fayette County, Greenbrier County, Mercer County, Monroe County, Nicholas County, Pocahontas County, Raleigh County, Summers County, Webster County	Federal Grant, State Grant	Services HRSA and WV Higher Education Policy Commission	153,837.00		
West Virginia Breastfeeding Alliance	Cinny	Kittle	West Virginia Hospital Association	ckittle@wvha.org	304-419-0899	www.wvba.com	100 Association Dr	Charleston	25311	2008	Women of childbearing age and younger; policy makers, employers, families, healthcare and social service providers.	several WV maternity hospitals, WVDHHR/WIC/Right From the Start, WV Perinatal Partnership, private physicians and other healthcare providers, public health advocates	statewide organization of healthcare providers, educators, social service providers, health/breastfeeding advocates. The mission of the organization is to improve the health of WV by working collaboratively to protect, promote and educate our community about breastfeeding.	Increase the initiation and duration of breastfeeding by increasing education and support of the breastfeeding mother/baby, including support by the healthcare system, employers, policy makers and the public.	Children, Community Environment, Disease Prevention, Education, Engaging Employers, Health Education, Health Promotion, Prevention, Public Health	Community, Hospital, Physician offices	Statewide					
Multi Visit Patients (MVPs) to the ED	Bob	Whitler	Partners in Health Network, Inc	bob.whitler@camc.org	304-388-7385	www.pihn.org	405 Capitol Street, Suite 505	Charleston	25301-1783	2011	Patients that make multiple inappropriate visits to te ED	CAMC West Virgina Health Right Prestera Community Mental Health Highland Hospital Cabin Creek Health System FamilyCare HealthCenter Community Care of West Virginia (CLAY) Kanawha County Commission	Beginning in 2011, The Kanawha County Commission's Taskforce on Health Care Reform, Chaired by Pat White and facilitated by John Moore focused on multiple visits to the hospital ED. Dr. Tom Horsman began reviewing MVPs and if their visits were appropriate for a visit to the ED. Added to This review was a second review that included patients coming to PIHN's small and rural hospitals. In terms of a definition of an MVP, we used 12 or more visits within a 12 month period at CAMC and 4 or more visits at a small and rural hospital in a 12 month period. As a direct result of the Kanawha County's task force , a number of interventions were tried. Results from the Health Right pilot demonstrated a decrease of 58 percent in ED visits (the results are attached) Also, thanks to the initiative of the CEO of Prestera, Mr. Bob Hansen, a pilot with MVP mental health patients was intiated between Prestera and CAMC. also resulted in a reduction in visits. In terms of small and rural hospitals, there were 2,028 patients with 4 or more visits at the PIHN small and rural hospitals. The total number of visits totaled 75,486. Patients with Medicaid insurance represented 38 percent of all visits. PIHN has submitted two grant proposals to fully implement a sustainable strategy. Without grant funding PIHN would be interested in working with DHHR on a pilot program to see if there could be a reduction in costs with improved health outcomes. A draft concept paper has been submitted. Currently Dr. Horsman is reviewing MVPs at CAMC General with mental health or substance abuse issues. Based on the analysis that is not yet complete, there are 2,200 patients that visited the Ed in 2013. There were 55 patients who came 12 or more times, 21 or 38 percent were covered by Medicaid. This percent may increase with Medicaid Expansion. The plan is to work with Highland Hospital, Prestera Center and Cabin Creek's Kanawha City location to provide enhanced mental health management.	MVPs will receive enhnaced care management at either a mental health facility and or a patient centered medical home. A fifty percent reduction in ED use with an increase in primary care or mental health visits is the goal	Behavioral Health, Behavioral Health Integration, Care Coordination, EHR/Registries, EHRs, Hospital Services, Local Government, Medical Homes, Physician services	FQHC / RHC, Free Clinics, Hospital	Boone County, Braxton County, Calhoun County, Clay County, Fayette County, Greenbrier County, Jackson County, Kanawha County, Lewis County, Nicholas County, Pocahontas County, Putnam County, Roane County, Wirt	Internal Funding				
Community Access Program	Bob	Whitler	Partners in Health Network, Inc	bob.whitler@camc.org	304-388-7385	www.pihn.org	405 Capitol St. Suite 505	Charleston	25301-1783	2001	5000 Working Uninsured	CAMC Cabin Creek Health System FamilyCare HealthCenter Boone Memorial Hospital Community Care of West Virginia (Clay) New River Health Association Hygeia Facilities Foundation	Provides access to health care for the working uninsured who are at or below 200 percent of the FPL. Members are enrolled on an annual basis at a FQHC in a secure web-based registry called CAPGate. CAPGate is used for improved care coordination. They also receive a card which provides access to free out patient care at CAMC. The program was initially funded by HRSA, but continues without external funding. The decision was made to continue the program even after the March 31 ACA enrollment dead-line.	Enhanced access to health care with improved coordination of services.	Access to Care, Care Coordination	FQHC / RHC, Hospital	Boone County, Clay County, Fayette County, Kanawha County, Putnam County	Internal Funding				
WVSBHA	Kelli	Caseman	West Virginia School-Based Health Assembly	kelli@wvsbha.org	304-444-5917	www.wvsbha.org	PO Box 11436	Charleston	25309	School-Based Health Centers started in WV in 1991.	Schools/communities	West Virginia Primary Care Association, WVDHHR-Division of Primary Care, Marshall University School-Health Technical Assistance Team	The mission of the West Virginia School-Based Health Assembly (WVSBHA) is to advance comprehensive health care in school settings through responsive policies, practices, and partnerships. Formed in 1995, WVSBHA serves as the lead membership organization and unified voice in the state for the advancement of school-based health care. Currently, there are 98 school-based health centers in our state, serving over 120 schools in 32 counties.	More SBHCs providing comprehensive health care (primary, mental and oral) in school settings	Access to Care, Behavioral Health, Behavioral Health Integration, Children, Health Education, Health Promotion, Oral Health, Public Health, Substance Abuse & Mental Health, Wellness Programs	FQHC / RHC, Hospital	Schools	Statewide, Barbour County, Boone County, Braxton County, Cabell County, Calhoun County, Clay County, Fayette County, Gilmer County, Grant County, Greenbrier County, Hardy County, Harrison County, Jackson County, Kanawha County, Lincoln County, Logan County, Marion County, McDowell County, Monroe County, Nicholas County, Pendleton County, Pleasants County, Pocahontas County, Putnam County, Raleigh County, Ritchie County, Roane County, Upshur County, Wayne County, Webster County, Wirt, Wood	Federal Grant, State Grant, Private Grant, Internal Funding	WVDHHR- Division of Primary Care		

Tobacco Cessation Training for Healthcare Providers	Cinny	Kittle	Healthcare Education Foundation/WV Hospital Association	ckittle@wvha.org	304-344-9744	http://www.wvha.org/Healthy-Initiatives.aspx	100 Association Dr	Charleston	25311	2011	healthcare providers: Physicians, nurses, PA, FNP's, social workers, dentists, dental hygienists, respiratory therapists, pharmacists, educators and any other providers that	WV Hospital Association WVDHHR Marshall University	The mission of the WV Breastfeeding Alliance is to improve the health of WV by working collaboratively to protect, promote and educate our community about breastfeeding.	Increase the number of providers that work with their patients in tobacco cessation, and to increase the quality and effectiveness of those encounters.	Disease Prevention, Health Education, Health Promotion, Oral Health, Prevention, Public Health	referral to resources tobacco cessation	the trainings are held in various settings, including hospitals, university campuses, and other meeting venues. The course is a 3 hour training.	Statewide	State Grant	DHHR		
CMMI Medical Neighborhood Demonstration Project	Jeffrey	Goode	CAMC and CAMC Physicians Group	jeff.goode@canc.org	304-388-7782	www.canc.org	CAMC	415 Morris Street	Suite 304	25301	July 2012	Primary Care, Medical Home/Neighborhood	CAMC Family Medicine Center Charleston Internal Medicine WomenCare/FamilyCare Cabin Creek Health Sytens	We are using technology to manage population health across four separate entities. This program is a CMS Innovation Center Demonstration via VHA and TransforMED.	Improved patient experience, improved quality, decreased cost and spread of the medical neighborhood concept	Access to Care, Care Coordination, Care Transitions, Cost Control, Data Collection or Analysis, EHR/HIE, EHR/Registries	FQHC / RHC, Hospital, Medical or Osteopathic School, Physician offices	Kanawha County	Federal Grant	CMMI	1,000,000	
Mountaineer Doctor Television (MDTV)	Cindy	Barnes	West Virginia University-MDTV	cbarnes@hsc.wvu.edu	304-293-1418	www.hsc.wvu.edu/telemedicine	1 Medical Center Dr.	PO Box 9081	Morgantown	26506	1992	Rural West Virginians	Higher Education: WVU, Charleston Division WVU, Eastern Division Potomac State College of WVU Hospitals: Davis Memorial Hospital Louis A Johnson VAMC Camden Clark United Hospital Center Mental Health Facilities: Appalachian Community Health Center Healthways Logan-Mingo Mental Health Prestera Center Souther Highlands Mental Health Westbrook Youth Health Services Pressley Ridge Clinics: Arbor Medical Associates Harpers Ferry Family Medicine RCB Clinic, Lewisburg WV Perinatal Partnership Sites: Grant Memorial Greenbrier Valley Medical Center Preston Memorial Roane General Saint Josephs Hospital, Buckhannon Stonewall Jackson Memorial Hosp. Summersville Mem. Hosp. Williamson Memorial Hosp.	WVU Telemedicine Program offers both Urgent and Outpatient care services to patients across WV. Urgent Care Services include: Telestroke NICU Pediatric Cardiology Nephrology Outpatient Services include: Telepsychiatry Pediatric Neurology, Cardiology, Neurosurgery Surgical Oncology	To allow patients to receive specialty care while remaining in their community.	Access to Care, Behavioral Health, Behavioral Health Integration, Care Coordination, Children, Cost Control, Disease Treatment, Education, Hospital Services, Prevention, Quality Improvement, Telehealth	University	Barbour County, Clay County, Grant County, Greenbrier County, Jackson County, Logan County, McDowell County, Mercer County, Mingo County, Monongalia County, Pocahontas County, Randolph County, Roane County, Tucker County, Upshur County, Wood	State Grant, Internal Funding	MDTV Program is funded through state dollars; Telepsychiatry program is funded through DHHR and private contracts		
West Virginia's Child Fatality and Domestic Violence Fatality Review	Trish	McCay	Fatality Review/OCME/BPH	patricia.a.mccay@wv.gov	304-558-6920		619 Virginia Street, W	Charleston	25302	1996	Children 0-17 years of age and adults who are affected by domestic violence	These programs are multidisciplinary and encompass a variety of state agencies and outside private agencies: State Police Wood County Sheriff's Dept Mt. Hope Police Dept WVU Hospitals Child Protective Services Bureau for Children and Families Corrections Prosecuting Attorney's Institute Bureau for Behavioral Health Children's Justice Task Force Private Psychologist	Responsibilities of the Fatality and Mortality Review Team and Advisory Panels. (a) The Fatality and Mortality Review Team shall establish the following advisory panels to carry out the purposes of this article including: (1) An unintentional pharmaceutical drug overdose fatality review panel to examine, analyze and review deaths resulting from unintentional prescription or pharmaceutical drug overdose; (2) A child fatality review panel to examine, analyze and review deaths of children under the age of eighteen years; (3) A domestic violence fatality review panel to examine, analyze and review deaths resulting from suspected domestic violence; (4) An infant and maternal mortality review panel to examine, analyze and review the deaths of infants and women who die during pregnancy, at the time of birth or within one year of the birth of a child. (b) The members of the Fatality and Mortality Review Team shall serve as members of each of the advisory panels established pursuant to this article. (c) The Commissioner of the Bureau for Public Health, in consultation with the Fatality and Mortality Review Team, shall propose rules for legislative approval in accordance with article three, chapter twenty-nine-a of this code that the advisory panels shall follow. Those rules shall include, at a minimum: (1) The representatives that shall be included on each advisory panel, (2) The responsibilities of each of the advisory panels, including but not limited to, each advisory panel's responsibility to: (A) Review and analyze all deaths as required by this article; (B) Ascertain and document the trends, patterns and risk factors; and (C) Provide statistical information and analysis regarding the causes of certain fatalities; (3) The standard procedures for the conduct of the advisory panels; (4) The processes and protocols for the review and analysis of fatalities and mortalities of those who were not suffering from mortal diseases shortly before death; (5) The processes and protocols to ensure confidentiality of records obtained by the advisory panel; (6) That the advisory panels must submit a report to the Fatality and Mortality Review Team annually, the date the annual report must be submitted and the contents of the annual report; (7) That the advisory panel may include any additional persons with expertise or knowledge in a particular field that it determines are needed in the review and consideration of a particular case as a result of a death in Scorecards are delivered each month. Each month the scorecard and health topics are different. Each topic covers a health behavior, health screening tool or disease. The scorecard has a short description of the health topic; a self-evaluation, a health index score, suggests about how to improve the health index score and contact information on how to get more help. The twelve monthly topics include body weight, cholesterol, fast food consumption, sexual activity, blood pressure, smoking, physical activity, sugared drink intake, dental and oral health, depression, diabetes and alcohol consumption.	Prevent untimely deaths in children and adults affected by domestic violence.	Children, Data Collection or Analysis, Health Education, Health Promotion, Integration of services, Prevention, Public Health, Research, Substance Abuse & Mental Health	Community, Public Health, Social Service Agency, State Agency	Statewide	Internal Funding	Bureau for Public Health	35,000.00		
Health Indix Score and Health Enhancement Research	Arnold	Hassen	West Virginia School of Osteopathic Medicine	ahassen@osteo.wsom.edu	304-647-6215	www.wsom.edu	400 North Lee Street	Lewisburg	24901	2011	Greenbrier Valley, Greenbrier County, Pocahontas County and Monroe County. All members of the community.	Over 120 distribution sites medical and non-medical.	Scorecards are delivered each month. Each month the scorecard and health topics are different. Each topic covers a health behavior, health screening tool or disease. The scorecard has a short description of the health topic; a self-evaluation, a health index score, suggests about how to improve the health index score and contact information on how to get more help. The twelve monthly topics include body weight, cholesterol, fast food consumption, sexual activity, blood pressure, smoking, physical activity, sugared drink intake, dental and oral health, depression, diabetes and alcohol consumption.	Community members self assess with the scorecard, then realize they need to take action to improve their health index score. The hope is they will seek a professional to help improve their health.	Communications, Disease Prevention, Disease Treatment, Education, Health Education, Health Literacy, Health Promotion	Community, Local Health Department, Pharmacy, Social Service Agency	Greenbrier County, Monroe County, Pocahontas County	Internal Funding		800		
Community Health Education Resource Person (CHERP)	Arnold	Hassen	West Virginia School of Osteopathic Medicine	ahassen@osteo.wsom.edu	304-647-6215	www.wsom.edu	400 North Lee Street	Lewisburg	24901	2012	Any adult who is interested in working to improve health in their community. No background experience or educational level is required. Adults 18	WVBPH, various clinics, Community Transformation Grant participants.	Community members are trained as community health workers across West Virginia. Training progresses through different competencies. CHERPs work as volunteers or in their current employment to promote healthier behavior among community members. Research activities include monitoring the activities of these CHERPs and how they improve patient compliance, patient health and health care efficacy and efficiency.	Improved community and individual health, improved patient compliance and improved health literacy.	Care Coordination, Care Delivery, Care Transitions, Community Environment, Disease Prevention, Disease Treatment, Education, Health Education, Health Literacy, Health Promotion, Patient Family Engagement, Prevention, Public Health, Research, Applied, Wellness Programs	Community, FQHC / RHC, Free Clinics, Home, Hospice, Local Health Department, Nursing Home, Public Health	Statewide	Federal Grant, State Grant, Private Grant, Internal Funding	CDC and WV BPH			
WV Chronic Disease Registry	Cecil	Pollard	WVU-SPH-Office of Health Services Research	cpollard@hsc.wvu.edu	304-293-1080	http://publichealth.hsc.wvu.edu/ohs_r	1 Medical Center Dr		Morgantown, WV	26506-9190	2005	Low income, rural, vulnerable populations	WV BPH, 32 FQHCs and 10 Free Clinics in WV	We use data from EHR's to monitor quality of care for patients with chronic disease or at risks for chronic disease. We are also interested in accuracy of data collected and reported using EHR data	Continue to build data base and to help improve quality of care in primary care settings	Asthma, Cardiovascular Disease, COPD, Data Collection or Analysis, Diabetes, Disease Prevention, Disease Treatment, EHR/HIE, EHR/Registries, Medical Homes, Obesity, Practice Transformation, Prevention, Public Health, Quality Improvement, Quality Measurement, Research, Research, Applied	FQHC / RHC, Free Clinics, Medical Homes, State Agency, University	Statewide	Federal Grant, State Grant, Private Grant	variety of state, federal and foundation support	200000	
Medicaid	Tina	Bailes	BMS	tina.r.bailes@wv.gov	304-356-4843	www.dhhr.wv.gov/bms	350 Capitol Street, Rm 251	Charleston	25301		Low-income individuals and those who are categorically eligible.	The Bureau for Medical Services (BMS) is the designated single state agency responsible for the administration of the State's Medicaid program. BMS provides access to appropriate health care for Medicaid-eligible individuals. Authorized under Title XIX of the Social Security Act, Medicaid is an entitlement program financed by the state and federal governments and administered by the states. The West Virginia Medicaid program is administered by the Department of Health and Human Resources (DHHR). Federal financial assistance is provided to states for coverage of medical services for specific groups of citizens.	The Bureau for Medical Services is committed to administering the Medicaid Program, while maintaining accountability for the use of resources, in a way that assures access to appropriate, medically necessary, and quality health care services for all members; provide these services in a user friendly manner to providers and members alike, and focus on the future by providing preventive care programs.	Behavioral Health Integration, EHR/HIE, Payment methodology, Quality Improvement, Quality Measurement	State Agency	Statewide	Federal Grant	Centers for Medicare and Medicaid Services				
Pulic Information/Risk Communication	Luke	Mitchell	WV Dept of Health and Human Resources/Bureau for Public Health/Center for Threat Preparedness	Luke.r.mitchell@wv.gov	304-558-6900	www.dhhr.wv.gov/healthprep	505 Capitol St Suite 200	Charleston	25301	2002	Population of West Virginia	WV Dept of Military Affairs and Public Safety Governor's Office	Assures public information/public education/risk communication information, relevant to Public Health and Healthcare is appropriately researched, collected, created, distributed to agencies and appropriate agencies. Prepares leadership for media presentations. Responds to media requests for information. Assists state and local agencies with public alerts.	An appropriately informed and educated population both pre-incident and during a public health or medical emergency incident.	Communications, Community Environment, Disease Treatment, Education, Health Education, Health Promotion, Integration of services, Local Government, Patient Safety, Prevention, Public Health, Workforce	Emergency Preparedness Hospital, Local Government, Local Health Department, Public Health, State Agency	Statewide	Federal Grant	Centers for Disease Control. Assistant Secretary for Preparedness and Response	60,000		
West Virginia Medical Institute - Quality Improvement Organization	John	Wiesendang	West Virginia Medical Institute	jwiesend@wvmi.org	304-346-9864	www.wvmi.org	3001 Chesterfield Place	Charleston	25311	Many projects have been ongoing for many years.	A variety of populations are targeted, but most of work focused on the Medicare beneficiary population as well as health care providers.	WVMI & Quality Insights, Mid-Atlantic Renal Coalition - a Quality Insights Company, many stakeholders and partners.	The West Virginia Medical Institute leads an array of quality improvement projects that help to support the Triple Aim. The attached document highlights multiple initiatives we currently work on in West Virginia and across the country.	Assuring that patients get the best health care in the right setting, assisting health care providers in providing quality and improving patient safety, and developing innovative solutions that improve quality across the continuum.	Access to Care, Cardiovascular Disease, Care Coordination, Care Transitions, Data Collection or Analysis, Diabetes, Disease Prevention, Education, EHR/HIE, EHR/Registries, EHRs, End of Life care, Health Education, Health Literacy, Home Care, Hospital Services, Long term care services, Medical Homes, Patient Family Engagement, Patient Safety, Physician services, Practice Transformation, Prevention, Quality Improvement, Quality Measurement, Research, Research, Applied	Community, FQHC / RHC, Home, Hospice, Hospital, Medical Homes, Nursing Home, Veterans Administration Site	Statewide	Federal Grant, Private Grant	Centers for Medicare & Medicaid Services and The US Department of Veterans Affairs			
Emergency Planning	Donnie	Haynes	WVDHHR/Bureau for Public Health/Center for Threat Preparedness	donnie.w.haynes@wv.gov	304-558-6900	www.dhhr.wv.gov/healthprep	505 Capitol St Suite 200	Charleston	25301	2002	Population of West Virginia	WV Dept of Military Affairs and Public Safety WV Division of Homeland Security and Emergency Management Local Health Depts in 55 WV Counties	Manage planning efforts and activities for preparation for and response to incidents affecting the public health and health care systems in WV.	Ensure public health and healthcare system response plans are current, provide technical assistance to others regarding public health response plans.	Behavioral Health Integration, Care Coordination, Care Delivery, Care Transitions, Communications, Local Government, Public Health	Emergency Preparedness Local Government, Local Health Department, Public Health, State Agency	Statewide	Federal Grant	Centers for Disease Control. Also Assistant Secretary for Preparedness and Response (both agencies within the US Dept of Health and Human Services)	100,000		
Strategic National Stockpile/Medical Countermeasure Program	Jim	Sowards	WVDHHR/BPH/CTP	Jim.Sowards@wv.gov	304-558-6900	http://www.dhhr.wv.gov/healthprep/programs/SNS/Pages/default.aspx	CTP	505 Capitol St	Suite 200	Charleston	2002	WV's Total Population, and guests of the state	WV State Police, WVDHSEM, CDC, County Health Departments	The main mission of the federal program is to provide critical medical assets to mitigate the effects of an emergency event that overwhelms the capacity of the local resources. The main focus is on natural disaster, pandemics, chemical, biological, radiological, nuclear, explosive events. At the state level the program prepares for the receipt and distribution of the federally supplied countermeasures and manages/maintains a state owned cache of response materiel both medicines and durable goods. The program also provides oversight and technical assistance to local health departments and hospitals to improve the ability to prepare for and respond to overwhelming events.	The state and local governments have planned for, trained for, and have the ability to request, receive, distribute, and dispense critical medical materials during a public health event that requires these assets.	Public Health	Preparedness and response	All of the above	Statewide	Federal Grant	Center's for Disease Control	213376

Responder Health and Safety	Sebra	Jenkins	WVDHHR/BPH/Center for Threat Preparedness	sebra.s.jenkins@wv.gov	304-558-6900	http://www.dhhr.wv.gov/healthprep	505 Capitol Street	Suite 200	Charleston	25301	2005	Target populations are Local Health Department and Regional Responder Health and Safety contacts across the state.		The program is one component of the overall Threat Preparedness efforts that support Local Health Departments, as well as regional and State partners as they work in their communities. The goal is to protect the physical health and safety as well as the mental and behavioral well being of health and medical professionals and support staff while they are assisting wit public health emergencies.	Expected outcomes are: Sustained health and safety of responders throughout public health events' Responder access to Personal Protective Equipment when needed during public health events. Responder access to health and medical, mental and behavioral health services as needed during and after public health events	Public Health		Local Health Department, Public Health, State Agency	Statewide		CDC, HHS/ASPR	5000.00	
Volunteer Management	Sebra	Jenkins	WVDHHR/BPH/Center for Threat Preparedness	sebra.s.jenkins@wv.gov	304-558-6900	http://www.dhhr.wv.gov/healthprep	505 Capitol Street	Suite 200	Charleston	25301	2005	The target populations are the Local Health Department and regional volunteer coordination contacts.		The program is one component of the overall Threat Preparedness efforts that support Local Health Departments, as well as regional and State partners as they work in their communities to recruit, train, engage, and retain health and medical professionals and support staff. Volunteers can be requested and used to assist in various ways during local, regional, state ad other disasters including acts of terrorism and natural disasters. Using WV REDI system, registrants can be contacted, credential verified, deployed, and tracked during times when needed. This program is responsible for support of coordination activities when requested and engaged by local, regional or state partners.	Ongoing technical support of volunteer services and systems to assist preparedness partners. A working and maintained ESAR VHP system = WV REDI A cadre of qualified and prepared health and medical professionals and support staff who are willing to assist their communities during public health emergencies.	Public Health		Local Health Department, Public Health, State Agency	Statewide	Federal Grant	CDC, HHS/ASPR	135,000.00	
WV Health Quality Data Alliance	Arnold	Hassen	West Virginia School of Osteopathic Medicine	ahassen@osteo.wvso.edu	304-647-6215	www.wvso.edu	400 North Lee Street		Lewisburg	24901	2013	Anyone interested in evidence based analysis of health care interventions	WVU School of Public Health Office of Health Services Research WV Health Improvement Institute	Providing support for the identification of health care data, and the collection and analysis of that data.	Evidence based analysis of effectiveness	Data Collection or Analysis, EHR/HIE, EHR/Registries, EHRs, Practice Transformation	Community, FQHC / RHC, Free Clinics, Hospital, Local Health Department, Medical or Osteopathic School, Public Health	Statewide		Grants submitted			
Public Health Emergency Preparedness Grant Administration	Carolyn	Elswick	West Virginia DHHR/BPH Center for Threat Preparedness	carolyn.s.elswick@wv.gov	304-558-6900	http://www.dhhr.wv.gov/healthprep	505 Capitol Street, Suite 200		Charleston	25301	2002	West Virginia Citizens	Local Health Departments and State Agency subawardees conducting threat preparedness, response, and recovery activities statewide. The organizations involved are 49 local health departments located throughout West Virginia and also several state office subawardees, including the WV Office of Epidemiology, WV Office of Laboratory Services, WV Bureau for Behavioral Health and Health Facilities, WV Office of Environmental Services, and the Office of the Chief Medical Examiner. The office also collaborates with other emergency management and homeland security government organizations to carry out its many activities.	Federal CDC Public Health Emergency Preparedness (PHEP) grant funding, programmatic and technical support are provided by the West Virginia Center for Threat Preparedness in support of public health threat preparedness, response, recovery, and other related planning and activities to 49 local health departments and also to several state office subawardees, including the WV Office of Epidemiology, WV Office of Laboratory Services, WV Bureau for Behavioral Health and Health Facilities, and WV Office of Environmental Services. The Director of Grants Management and Administration also serves as a primary liaison with BPH Central Finance Office and DHHR Grants Management Division in developing, implementing, monitoring, and reporting on grant related activity to assure all state and federal policies are adhered to and necessary records are kept to support both internal and external audits. Negotiate programmatic activities and grant budgets among internal and external (state and local) partners to reach federally required consensus and recommend the allocation of funds to sub-grantees and approve or disapprove funding redirect requests. Monitor progress of grant related projects and expenditures of program managers within the Center for Threat Preparedness and responsible staff across DHHR and external sub-recipients to assure required compliance and serve as the administrative contact for program staff regarding online grants management systems. Also consult with federal project officer and state agency staff on funding levels, program activities, and implementation of regulations and policies to assure required compliance.	The expected outcomes of the program are to provide professional leadership of and manage grants management activities for the Center for Threat Preparedness in order to assure that the public health preparedness initiative goals, objectives, and requirements are met. Develop and manage processes and activities related to grant development, implementation, and reporting to assure submissions are cohesive, complete, and meet all grant related requirements, therefore contributing to the Center's efforts to reach its goals and objectives.	Public Health	Public health emergency preparedness (PHEP) grant development, implementation, and reporting.	Local Health Department, Public Health, State Agency	Local Health Departments, communities statewide, and State Agencies	Statewide		Public Health Emergency Preparedness (PHEP) grant	4,954,012
Adolescent Health Initiative	Patty	McGrew	DHHR/Infant, Child & Adolescent Health/OMCFH	Patty.F.McGrew@wv.gov	304-437-2744	www.wdhrh.org/ahi	DHHR-Diamond Bldg	350 Capitol Street	Room 427	Charleston	1988	Adolescents, parents and other connected adults in the community	RESA 1, 5, 7 & 8, United Way of Central WV, New River Health, Valley Health, Marshall Co FRN, Rainelle Medical Center, Regeneration, Inc. CASE-WV	Formal work with the Adolescent Health Initiative (AHI) began in 1988. Introduction of the developmental asset principles of Search Institute brought about a change in the mission in 1993. Search Institute has identified 40 positive experiences and qualities everyone can bring into the lives of youth, called the developmental assets. Organized training opportunities are provided by a workforce hired from the community they serve and offered in the community that the youth live. This workforce, called Adolescent Health Coordinators, is located in each of the eight regions of the state. These Coordinators offer young people, parents, and other significant adults in a child's life skill building sessions on conflict resolution, communication, increased awareness of the harmful consequences of risk behaviors, and strategies to develop self-reliance and improve responsible decision making. Welfare reform legislation, P.L. 104-193, created a new section, 510, of Title V, Maternal and Child Health Block Grant of the Social Security Act, establishing a separate program for abstinence education. Grant applications were confined solely to state health agencies responsible for the administration of Title V. West Virginia welcomed the federal funds for abstinence education as a way to complement our existing efforts to strengthen families and build youth resiliency while preventing teen pregnancy.	To provide statewide leadership and collaborative partnerships designed to support a comprehensive continuum of care for youth, families and communities. The AHI utilizes the evidence-driven, holistic, positive youth development approach to promote health and reduce risk behaviors in youth with focused attention on: teen pregnancy & STDs; obesity; substance abuse, including alcohol and tobacco use; suicide & depression; and the promotion of preventive health services.	Disease Prevention, Health Education, Health Promotion, Medical Homes, Obesity, Physical Activity, Prevention, Public Health, Substance Abuse & Mental Health	Community, Elementary Schools, Free Clinics, Local Government, Local Health Department, Public Health, Secondary Schools, Settings	Youth serving non-profit agencies, faith based youth groups, after school programs	Statewide	Federal Grant	HHS/MCHB & ACF (2 grants)	1,000,000	
Just Say No to Drugs Summer Camp	Arnold	Hassen	West Virginia School of Osteopathic Medicine	ahassen@osteo.wvso.edu	304-647-6215	www.wvso.edu	400 North Lee Street		Lewisburg	24901	2013	High School Students	SE-AHEC	Students learn the basis of pharmacology to compliment the science background they already have.	Awareness of dangers of drug use	Education, Health Education, Health Promotion	Medical or Osteopathic School	Greenbrier County	State Grant	SE-AHEC			
Exercise Coordination	Kaitlin	Bedekovich	West Virginia Department Health & Human Resources Bureau of Public Health Center for Threat Preparedness	Kaitlin.M.Bedekovich@wv.gov	304-558-6900	http://www.dhhr.wv.gov/healthprep/Pages/default.aspx	505 Capitol Street	Suite 200	Charleston	25314	2002	Local health departments, hospitals, public health professionals		Manage PHEP (Public Health Emergency Preparedness) and HPP (Hospital Preparedness Program) grant deliverables regarding exercises for the Center for Threat Preparedness (as awarded) and local health departments and hospitals (as subawardees). Ensure HSEEP (Homeland Security Exercise and Evaluation Program) methodology is followed for all exercise programs. Provide technical assistance as needed. Ensure After-Action Reports and Improvement Plans are completed for all exercises.	Exercise/drill emergency plans in preparation for response to incidents. Build response capability.	Behavioral Health Integration, Care Delivery, Emergency Communications, Community Environment, Integration of services, Local Government, Patient Safety, Public Health, Quality Improvement	Behavioral Health Agency, Community, Hospital, Local Health Department, Public Health, State Agency	Statewide	Federal Grant	Centers for Disease Control and Assistant Secretary for Preparedness and Response	340,000		
Rural Health Initiative	Arnold	Hassen	West Virginia School of Osteopathic Medicine	ahassen@osteo.wvso.edu	304-647-6215	www.wvso.edu	400 North Lee Street		Lewisburg	24901	2011	Pre-college students College students Medical school students	West Virginia Higher Education Policy Commission	The WV/SOM Rural Health Initiative (RHI) program is a multifaceted workforce career development program that encourages careers in primary health care in rural underserved areas.	Encourage high school students to consider careers in rural medicine or other health care professions Engage college students into unique program opportunities to gain exposure to clinical responsibilities in a hospital environment Expose medical students to workforce environments that may involve disease and injuries to a patient population in rural West Virginia Provide medical students with mentors who will encourage them to participate in rotations that will enhance and reinforce interest in rural primary care practice	Education, Workforce	Medical or Osteopathic School	Statewide	State Grant	West Virginia Higher Education Policy Commission	618,094		
Hospital Preparedness Program	Yolanda	Sowards	DHHR/BPH/Center for Threat Preparedness	yolanda.k.sowards@wv.gov	304-558-6900	www.dhhr.wv.gov/healthprep	505 Capitol Street	Suite 200	Charleston	25301	2002	Citizens of WV. s.	As above	This program is a federal initiative for preparedness that began after the terrorist attacks of 9/11. It is aligned federally, and is funded by the Hospital Preparedness Program (HPP)and Public Health Emergency Preparedness Program (PHEP)Cooperative Agreement. The federal agencies responsible for this agreement are the Centers for Disease Control and the Assistant Secretary for Preparedness and Response. Each of the states receive this money for the preparedness initiative in the United State	Increase the nation's healthcare system and public health preparedness status for all types of hazards.	Healthcare and Public Health Threat Preparedness	Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospital, State Agency	Statewide	Federal Grant	Centers for Disease Control and Assistant Secretary for Preparedness and Response	1,383,000		

Office of Emergency Medical Services	Melissa	Kinnaird	DHHR/BPH/OEMS	melissa.j.kinnaird@wv.gov	304-558-3956 wvoems.org	350 Capitol St. Room 425	Charleston	25301	1976	all citizens and visitors of WV	There are approximately 32 hospitals that participate in the trauma system.	Medical direction is patient case-management, provided via a complex system supporting EMS personnel in the provision of pre-hospital care, both on scene and en route to the receiving hospital. Other aspects of medical direction are the development of treatment protocols for EMS personnel to follow, evaluation of performance, improvement of that performance, etc. The Trauma division provides designation and certification to hospitals. There are various levels of trauma designation that ensures patients are transported to the appropriate hospital for the level of care that is needed based on the patients' injuries. This division conducts routine inspections of hospitals to ensure appropriate criteria are met and maintained within this trauma system. This division also gathers a wide variety of medical information from participating hospitals for use in improving the overall system of care. The Division of Trauma, Designation and Categorization is responsible for and carries out the operation and management of the state trauma/emergency care system. This includes trauma center designation, facility categorization, system design and operation, medical review and audit for Performance Improvement by assuring Quality system-wide and development/enforcement of triage, transfer and emergency procedures guidelines. WV Code §64-27 provides for the development of an inclusive trauma system which optimally integrates the Emergency Medical Services System and acute care facilities within our state to best meet needs of all injured patients regardless of geographic location or severity of injury. Assuring access to timely and appropriate trauma and emergency care to achieve optimal and cost effective care is the ultimate goal of this division. The EMS division oversees training and certification of EMS personnel, ensures compliance with legislative code and rule, sets practice standards, inspects approximately 2000 emergency medical vehicles and maintains licensure of EMS agencies. The WV EMS system includes over 10,000 EMTs, paramedics, mobile critical care paramedics/nurses and emergency medical vehicle drivers that work in approximately 240 EMS agencies. The WV EMS system is considered a leader in the provision of pre-hospital care. Other states often seek assistance and information sharing related to our training and certification processes to improve their own.	Quality pre-hospital care to the citizens and visitors of WV by qualified and trained personnel, a trauma system that is able to provide appropriate levels of care to those with traumatic illness/injury, data based on these systems (pre-hospital and trauma) that is analyzed and utilized for improved systems/responses/provision of care.	Care Delivery, Communications, Data Collection or Analysis, Education, End of Life care	Emergency Medical Services Trauma Designation and Certification Emergency Medical Services - Children	Community, Hospital, State Agency	Emergency Medical Service Agencies	Statewide	Federal Grant, Internal Funding	EMS-C Partnership grant, state funds for remainder of funding	47,000,000.00
Health Homes	Cindy	Beane	BMS	Cynthia.e.beane@wv.gov	304-356-4844	350 Capitol St	Charleston	253001	To Start July 1, 2014	Medicaid individuals with a dx of bipolar disorder and risk of/ infected with hepatitis B or C.	A Health home is a place where individual with certain chronic health conditions can receive the medical, behavioral and related social services and supports they need, coordinated in a way that recognizes all of the their needs as individuals. Health homes provide needed care coordination to those with chronic conditions.	Individuals with bipolar disorder will experience longer periods of stability: Use fewer medications and be more compliant: know their hepatitis risk and status: Be educated about the spread of hepatitis: Be identified earlier and treated more effectively for substance abuse: Require fewer ER visits and hospitalizations.	Access to Care, Behavioral Health, Behavioral Health Integration, Care Coordination, Care Transitions, Cost Control, Disease Prevention, Education, Health Education, Health Promotion, Patient Family Engagement, Physician services, Prevention, Quality Measurement, Substance Abuse & Mental Health	Behavioral Health Agency, FQHC / RHC, Physician offices	Cabell County, Kanawha County, Mercer County, Putnam County, Raleigh County, Wayne County	Funded by Medicaid 90% match first 8 quarters					
Special Supplemental Nutrition Program for Women, Infants and Children	Cindy	Pilo	Office of Nutrition Services, Bureau for Public Health	cindy.m.pilo@wv.gov	304-558-0030 ons.wvdhhr.org	350 Capitol St., Room 519	Charleston	26164	1974	Pregnant, breastfeeding and postpartum women, infants and children up to the age of five.	WIC Farmers' Market Nutrition Program	The WIC program provides nutrition education, including breastfeeding promotion and support, supplemental foods, immunization screenings and referrals for other health and social services needs. Through the WIC Farmers' Market Nutrition Program, participants receive coupons to purchase fresh fruits and vegetables at local approved farmers' markets and farm stands.	Pregnant women participating in WIC typically have longer pregnancies leading to fewer premature births; have fewer low and very low birth-weights babies; experience fewer fetal and infant deaths; seek prenatal care earlier in pregnancy and consume more of such key nutrients as iron, protein, calcium and Vitamins A & C. When the infants are breastfed they tend to be healthier since they receive antibodies from the breast milk, which protects them against infection. Participation in the WIC breastfeeding peer counseling program is associated with an increased rate of breastfeeding initiation and breastfeeding has been shown to reduce the risk for developing obesity later in childhood. WIC helps to ensure infants' and children's normal growth, reduces levels of anemia, increased immunization rates, improves access to regular healthcare/social services and improves diets. WIC interventions can help improve healthful behaviors that are linked to reducing early childhood overweight. WIC nutrition	Access to Care, Children, Cost Control, Education, Food, Health Education, Health Promotion, Integration of services, Obesity, Oral Health, Physical Activity, Prevention, Public Health	Community, Local Health Department, Public Health, State Agency	Primary Care Centers	Statewide	Federal Grant	United States Department of Agriculture	37,857,655	
Epidemiology	Daniel	Christy	DHHR/BPH/Health Statistics Center	daniel.m.christy@wv.gov	304-356-4186 www.wvdhhr.org/bph/hsc/	350 Capitol Street, Room 165	Charleston	25301	1990	All West Virginia residents, public health practitioners and researchers.	The Epidemiology Section analyzes all data collected in the Health Statistics Center's 2 surveillance systems, the Behavioral Risk Factor Surveillance System (BRFSS) and the Vital Statistics System (VSS). A team of epidemiologists analyze the data and write reports on special topics in order to inform public health practitioners, researchers, and the public about the health of West Virginia residents. The statistics generated by the Epidemiology Section are also used by BPH offices and DHHR bureaus to plan public health programs and evaluate program outcomes.	Public health statistics, special topic reports, and statistical briefs.	Access to Care, Alzheimers Disease, Asthma, Behavioral Health, Cardiovascular Disease, Communications, COPD, Data Collection or Analysis, Diabetes, Disabilities, Disease Prevention, End of Life care, Food, Health Education, Health Promotion, Obesity, Oral Health, Physical Activity, Public Health, Research, Research, Applied, Research, Primary, Substance Abuse & Mental Health	Public Health, State Agency	Statewide	Federal Grant, State Grant, Internal Funding	Centers for Disease Control and Prevention (CDC), state of WV, and vital registration revenue	200,000			
Statistical Services	Daniel	Christy	DHHR/BPH/Health Statistics Center	daniel.m.christy@wv.gov	304-356-4186 www.wvdhhr.org/bph/hsc/	350 Capitol Street, Room 165	Charleston	25301	1920	All West Virginia residents, public health practitioners, and researchers.	Statistical services involves data management of the Health Statistics Center surveillance systems, the Behavioral Risk Factor Surveillance System (BRFSS) and the Vital Statistics System (VSS). Data contained in the BRFSS include survey responses from adults in the state related to health status, behavioral risk factors, and chronic conditions. The VSS includes data collected from all vital events that occur in the state and among state residents including birth, marriage, divorce, death, fetal death, induced termination of pregnancy, and infant death. Statistical services also disseminates health statistics to the public, public health practitioners, and researchers. Publications and health statistics are used to educate the public, inform public policy, and guide disease prevention efforts in the state.	Collect and produce accurate, high quality, complete, and timely data and health statistics.	Access to Care, Alzheimers Disease, Asthma, Behavioral Health, Cardiovascular Disease, Care Delivery, COPD, Data Collection or Analysis, Diabetes, Disabilities, Disease Prevention, Education, End of Life care, Food, Health Education, Health Literacy, Health Promotion, Hospital Services, Local Government, Obesity, Oral Health, Patient Safety, Physical Activity, Prevention, Public Health, Quality Improvement, Quality Measurement, Research, Research, Applied, Research, Primary, Wellness Programs, Workforce	Public Health, State Agency	Statewide	Federal Grant, State Grant	Centers for Disease Control and Prevention (CDC) and state of WV	500,000			
WV Behavioral Risk Factor Surveillance System (WVBRFSS)	Daniel	Christy	DHHR/BPH/Health Statistics Center	daniel.m.christy@wv.gov	304-356-4186 www.wvdhhr.org/bph/hsc/	350 Capitol Street, Room 165	Charleston	25301	1984	All adult residents of West Virginia who have a landline or cell phone.	The WV BRFSS is a state-based surveillance system of health surveys that collect information about health risk behaviors and health conditions among WV adults. Random telephone interviews are conducted monthly by the Health Statistics Center and covers the entire state. Yearly sample size is approximately 5,000. West Virginia was one of the 15 initial states to conduct the survey in 1984 and has been running continuously for 30 years.	Generate state and county level prevalence estimates of chronic health conditions and behavioral risk factors that impact health status. Also analyze the data by sociodemographic factors in order to determine priority populations.	Access to Care, Alzheimers Disease, Asthma, Behavioral Health, Cardiovascular Disease, COPD, Data Collection or Analysis, Diabetes, Disabilities, Disease Prevention, End of Life care, Health Promotion, Obesity, Oral Health, Physical Activity, Prevention, Public Health	Disease and risk factor comorbidities, health care utilization, injury, and health status.	Public Health, State Agency	Statewide	Federal Grant	Centers for Disease Control and Prevention (CDC)	450,000		
Vital Records Certification	Gary	Thompson	DHHR/BPH/HL/Health Statistics Center/Vital Registration Office	gary.l.thompson@wv.gov	304-558-2931 http://www.wdvh.org/bph/hsc/	Vital Registration Office 350 Capitol St., Rm 165	Charleston	25301-3701	1917	All those who need certified copies of vital records, primarily births and deaths, but also marriages for a limited time periods. This is an association of providers who provide in-home care services for the elderly and disabled.	County Clerks.	This project is part of the "legal" arm of the Vital Registration Office, codified as the section of vital statistics in WV State Code §16-5-1 et seq. The Office has the ability, under law, to produce certified copies of vital records in its holdings which, under most circumstances, are prima facie evidence of the events in courts of law. They are proof of live birth and of death and are used for multiple purposes over long time spans.	To issue certified copies in a timely manner to those who are qualified to make application for them.	Legal	Local Government, State Agency	Statewide	Internal Funding				
Home Care Association of WV, Inc.	Nancy	Tyler	Home Care Association of WV, Inc.	nancytyler@live.com	304-552-4730	1553 Autumn Road	Charleston	25314	12/2013		Many providers of home care services who provide services in all counties.	The association works to improve quality, educate our members and ensure our clients have a voice through our legislative work. We also work to increase funding for home and community based services.	Our goal is to ensure availability of home and community based services to enable our clients to live in the setting of their choice with dignity.	Access to Care, Alzheimers Disease, Care Coordination, Care Delivery, Care Transitions, Cost Control, Disabilities, Disease Prevention, Disease Treatment, Education, End of Life care, Home Care, Home Monitoring, Patient Family Engagement, Patient Safety, Prevention, Quality Improvement, Social Support Services	Community, Home	Statewide	membership dues	60,000			

Death Registration Program	Gary	Thompson	DHHR/BPH/HH/Health Statistics Center/Vital Registration Office	gary.l.thompson@wv.gov	304-558-2931	http://www.wvdhhs.org/bph/hsc/	Vital Registration Office	350 Capitol St., Rm 165	Charleston	25301-3701	1917	All those whose deaths occur in the state of West Virginia.	Funeral directors, hospitals, physicians, nursing homes, medical examiners/coroners, cemeteries, crematoriums, county clerks.	The Death Registration Program seeks to register ALL deaths that occur in the state of West Virginia. It is the function of the Vital Registration Office, codified as the "section of vital statistics" in WV State Code §16-5-1 et seq., to control all activities regarding the death registration process including directing and supervising all those who are active participants, conducting training programs, prescribing, furnishing and distributing forms, ensuring quality, timeliness, and complete reporting of deaths, and providing for their secure storage as legal documents. In addition to their use as legal documents, which are prima facie evidence of date of death (thus, age at death) and place of death, the records also contain important health and medical information such as cause of death and manner of death. Death (and birth) certificate information is the cornerstone of public health epidemiology in the United States.	To register every death that occurs in the state of West Virginia.	Data Collection or Analysis, Public Health	Legal	Hospice, Hospital, Physician offices, Public Health	Statewide	Federal Grant, State Grant, Internal Funding	CDC National Center for Health Statistics			
Birth Registration Program	Gary	Thompson	DHHR/BPH/HH/Health Statistics Center/Vital Registration	gary.l.thompson@wv.gov	304-558-2931	http://www.wvdhhs.org/bph/hsc/	Vital Registration Office	350 Capitol St., Rm 165	Charleston	25301-3701	1917	All those people born in West Virginia and all of those who are foreign born who were adopted in the West Virginia.	All WV birthing facilities and health care providers/professionals. All WV County Clerks.	The Birth Registration Program seeks to register ALL live births and fetal deaths that occur in the state of West Virginia and assists in the creation of "Certificates of Foreign Birth" for those born in other countries who are subsequently adopted by a person or a couple who reside in West Virginia at the time of the adoption. It is the function of the Vital Registration Office, codified as the "section of vital statistics" in WV State Code §16-5-1 et seq., to control all activities regarding the birth registration process including directing and supervising all those who are active participants, conducting training programs, prescribing, furnishing and distributing forms, ensuring quality, timeliness, and complete reporting of birth, and providing for their secure storage as legal documents. In addition to their use as legal documents, which are prima facie evidence of name, date of birth (thus, age at any given time), place of birth (thus, US citizenship), sex, and parentage, the records also contain important health and medical information. Birth (and death) certificate information is the cornerstone of public health epidemiology in the United States.	The filing of all live births and fetal deaths that occur in the state of West Virginia.	Data Collection or Analysis, Public Health	Legal	Home, Hospital, Public Health	Statewide	Federal Grant, State Grant, Internal Funding	CDC's National Center for Health Statistics			
Health Care Provider Placement Program	Brandon	Carman	WVDHHR/Division of Rural Health and Recruitment/Office of Community Health Systems and Health Promotion/BPH	brandon.k.carman@wv.gov	304-558-4382			350 Capitol Street	Room 515	Charleston	25301	1993	Health Care professionals seeking employment opportunities in the state of West Virginia and Health Care Organizations/Facilities currently in need of medical professionals.	Rural Recruitment and Retention Network (3/Net) National Organization of State Offices of Rural Health (NOSORH) WV Medical Association WV Primary Care Association WVU School of Medicine Marshall University School of Medicine University of Charleston School of Pharmacy WV School of Osteopathic Medicine National Health Service Corps National Rural Health Association WV Higher Education Policy Commission WV Center for Nursing Nursing Physician Assistant, and Allied Health Programs at various educational institutions across the state.	The Health Care Provider Placement Program functions as a recruitment clearinghouse. The Program Coordinator acts as a liaison and facilitates contact between the medical placement candidate and the health care facility's recruiter to fill vacant employment opportunities. The Coordinator collaborates with stakeholders in both medical education and the provision of medical services to obtain information on the current health care workforce environments and demands. Coordinator uses Practice Sights software to maintain information on opportunities and candidates. Matching potential medical professionals to facilities based on candidate interests and facility criteria. Coordinator follows up with both parties regarding interview process and final hiring decision. Various surveys (conducted by mail or electronically) and site visits are conducted to obtain data on facility needs, provider satisfaction, facility satisfaction, and overall program effectiveness. Coordinator develops and maintains databases for the purpose of tracking provider recruitment and retention of placed candidates. Coordinator provides analysis and reports of recruitment and retention activities for all division programs (State Loan Repayment, Recruitment and Retention Community Project, National Health Service Corps, and J-1 Visa Waivers.) Coordinator also analyzes data and provides recommendations on improvement of current strategies and processes as well as develops and fosters new collaborations with additional stakeholders.	Successful referral and placement of health care professionals in West Virginia. Improve retention of medical providers at health care facilities. Identify state wide and national trends in recruitment and retention.	Access to Care, Care Delivery, Data Collection or Analysis, Engaging Employers, Hospital Services, Pharmacy / Pharmacist Services, Physician services, Workforce	Health Care Provider Services	Allied Health Program, Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospice, Hospital, Local Government, Local Health Department, Medical Homes, Medical or Osteopathic School, Nursing Home, Nursing School, Pharmacy, Pharmacy School, Physician offices, State Agency, Veterans Administration Site	Statewide	Federal Grant, State Grant	HRSA and Primary Care Cooperative Agreement	0	
Community-Clinical Linkages	Jessica	Wright	DHHR/Health Promotion & Chronic Disease/OCHSHP	Jessica.G.Wright@wv.gov	304-356-4193			350 Capitol Street	Room 514	Charleston	25301	2010	All WV population	Change the Future WV WVU Extension Service WVU School of Public Health selected community health centers Healthy Lifestyles Coalition	Health Promotion & Chronic Disease works with health systems and community organizations to increase patient referrals to community programs and provide support for policies that improve health	In previous years: Worked with partners like Change the Future WV in developing 110 policies supporting access for physical activity and fruit and vegetables Assessed 26 higher education workites for wellness policies Trained 255 instructors to lead self-management classes and programs	Asthma, Cardiovascular Disease, Care Coordination, Care Delivery, Children, Community Environment, Diabetes, Disease Prevention, Disease Treatment, Education, EHR/HIE, EHR/Registries, EHRs, Food, Health Education, Health Promotion, Local Government, Medical Homes, Obesity, Patient Family Engagement, Physical Activity, Prevention, Public Health, Technology, Wellness Programs, Workforce	Pre-diabetes	Community, FQHC / RHC, Local Government, Physician offices	Worksites; community agencies	Statewide		Centers for Disease Control & Prevention; National Association of Chronic Disease Directors	
Health Systems/Quality Improvement	Jessica	Wright	DHHR/Health Promotion & Chronic Disease/OCHSHP	Jessica.G.Wright@wv.gov	304-356-4193			350 Capitol Street	Room 514	Charleston	25301	2010	Health care providers	WVU Office of Health Services Research WV Primary Care Association WV Department of Education WV Academy of Family Physicians	Health Promotion & Chronic Disease supports quality care by providing health care provider education and training	In the previous year: Provided education and training for 3,000 professionals in chronic disease management and prevention Assistance for community health centers has resulted in: 70% reduction in A1C values 50% increase in patients receiving blood pressure, cholesterol, and triglyceride assessments 60% increase in patients receiving BMI assessments	Asthma, Cardiovascular Disease, Care Coordination, Care Delivery, Care Transitions, Children, Data Collection or Analysis, Diabetes, Disease Prevention, Disease Treatment, Education, EHR/HIE, EHR/Registries, EHRs, Health Promotion, Medical Homes, Obesity, Patient Family Engagement, Physical Activity, Physician services, Practice Transformation, Prevention, Public Health, Quality Improvement, Quality Measurement, Technology, Workforce	Pre-diabetes Cancer	FQHC / RHC, Free Clinics, Medical Homes, Physician offices, Public Health	Some trainings take place at professional conferences	Statewide		Centers for Disease Control & Prevention	
Community Mobilization	Jessica	Wright	DHHR/Health Promotion & Chronic Disease/OCHSHP	Jessica.G.Wright@wv.gov	304-356-4193			350 Capitol Street	Rppm 514	Charleston	25301	2010	All communities in WV (adults and children)	WV Development Office Benedum Foundation WVU Center for Excellence in Disabilities Arthritis Foundation Mountains of Hope Cancer Coalition Marshall University WVU Extension Service	Health Promotion & Chronic Disease provides resources to empower communities/creation of healthier environments.	In the previous year: More than 30 communities created healthier environments 272 schools took part in the Xbox "Get Kinect-ed" program 2000 nursing home residents took part in teh Senior Olympics Over 3,800 people participated in community based chronic disease self-management classes	Asthma, Cardiovascular Disease, Care Coordination, Children, Communications, Community Environment, Diabetes, Disease Prevention, Disease Treatment, Education, Engaging Employers, Food, Health Education, Health Promotion, Local Government, Long term care services, Obesity, Patient Family Engagement, Physical Activity, Prevention, Public Health, Wellness Programs		Business/Retail Establishment, Community, FQHC / RHC, Home, Local Government, Local Health Department, Public Health, Secondary Schools	Statewide		Centers for Disease Control & Prevention and state funds		
Rural Health Residency Grant Program	Laura	Boone	Higher Education Policy Commission	lboone@hepc.wvnet.edu	304-558-0530	www.hepc.com		1018 Kanawha Blvd. East		Charleston	25301	2005	Rural Health Care Facilities and stakeholders interested in working on developing rural based medical residency programs/teaching health centers or other creative ways of providing residents		A grant program providing \$10-\$30,000 grants to organizations interested in working on developing rural based medical residency programs/teaching health centers or other creative ways of providing residents with extended exposure to rural communities during residency. Research shows that physicians who train in rural environments are more likely to want to practice and remain in practice in rural communities.	Improved recruitment and retention of medical providers to rural areas.	Access to Care, Care Delivery, Community Environment, Education, Engaging Employers, Health Education, Hospital Services, Physician services, Practice Transformation, Workforce	Provider recruitment and retention	FQHC / RHC, Hospital, Medical or Osteopathic School, Physician offices, State Agency	We currently don't have any open grants, the settings listed above would be typical partners/interested parties in a project.	Statewide		Higher Education Policy Commission	70,000
CLINICAL SERVICES	RENEE	SWISHER	MID-OHIO VALLEY HEALTH DEPT. CLINICAL SERVICES	renee.a.swisher@wv.gov	304-485-7374	www.movhd.com	211 6TH STREET		PARKERSBURG	26101		program started with inception of health department	WV IMMUNIZATION PROGRAM WV FAMILY PLANNING PROGRAM WV STD PROGRAM WV BCCP PROGRAM WV TB PROGRAM WV HEALTHCHECK PROGRAM REQUIREMENTS	CLINICAL SERVICES PROVIDES: FAMILY PLANNING (supplies, paps, physicals, breast exams, pregnancy testing) STD TESTING: test for sexually transmitted diseases, treatment, hepatitis B for high risk, HIV testing/counseling, TBC CLINIC: Diagnostic, X-Ray, skin testing, and medication provided for positive paps, IMMUNIZATIONS (children's) all vaccines provided through state Immunization & VFC Program for prevention of disease. (Adult) private purchase vaccines: Hepatitis A&B; Tdap, MMR, IPV, Meningitis, Shingles, Varicella, Flu (seasonal) Pneumonia, etc. (Travel) MOVHD Is a certified travel clinic, provide: Yellow Fever, Hepatitis A&B, Typhoid, IPV, MMR, Meningitis, Flu (seasonal), Pneumonia, Rabies, Japanese Encephalitis, Varicella, etc.... BCCSP (Breast/Cervical Cancer screening Program)Pleasants County only HEALTHCHECK: children's physicals Other Services: blood pressures checks, some lab testing services, community educational services, community health services.	To provide Public Health Services to the members of our communities	Access to Care, Children, Disease Prevention, Disease Treatment, Education, Health Education, Health Promotion, Prevention, Public Health		Local Health Department, Public Health	Provide outside clinics as needed: example: flu clinics to area businesses/schools during flu season. Provide other services and clinics as requested. Community Education provided to area Businesses and School settings as requested.	Calhoun County, Pleasants County, Ritchie County, Roane County, Wirt, Wood	Federal Grant, State Grant, Private Grant, Internal Funding	Federal and State monies		
Choosing Wisely	Perry	Bryant	West Virginians for Affordable Health Care	perrybryant@suddenlink.net	304-344-1673	www.wvahc.org	1544 Lee Street		Charleston	25311	2014	West Virginia's providers and consumers	Perinatal Partnership, WV FREE, WV SOM, West Virginia Nurses Association, Partners in Health, Primary Care Association, Highmark, PEIA, West Virginia Hospital Association, West Virginia Association of Free Clinics, Medicaid, and CHIP.	Choosing Wisely is a national effort by the American Board of Internal Medicine Foundation to identify questionable procedures. More than 30 physician specialty organizations have each selected five procedures in their areas of expertise that are of questionable value. In West Virginia, the System Improvement Committee is reducing this list of approximately 200 procedures to 5 or 10 of the most important procedures, and then begin an educational campaign to inform providers and consumers about the need to question whether these procedures should be performed.	The expected outcome is a reduction in the number of selected questionable procedures, which should produce better outcomes for patients and a moderation in health care costs.	Cost Control, Education, Health Education, Patient Family Engagement, Patient Safety, Practice Transformation, Quality Improvement	Community, Free Clinics, Home, Hospital, Physician offices	Statewide	Private Grant					
Black Lung Clinics Program	David	Haden	BPH/OCHSHP/Division of Primary Care	david.s.haden@wv.gov	304-356-4234			350 Capitol Street	Room 515	Charleston	25301-3716	1980	Active and retired coal miners	See attachment and website	Services include screening, diagnosis, treatment, education, outreach rehabilitation and benefits counseling.	Better quality of life and receipt of warranted black lung benefits	Access to Care, COPD, Education, Home Care, Home Monitoring, Physical Activity		FQHC / RHC	Statewide	Federal Grant, State Grant	HRSA Office of Rural Health Policy	1,400,000	

Home Health Quality Improvement (HHQI) National Campaign	Crystal	Welch	West Virginia Medical Institute (WVMI)	cwelch@wvmi.org	304-346-9864	www.homehealthquality.org	3001 Chesterfield Ave.	Charleston	25304	January 2007	The HHQI National Campaign is dedicated to improving the quality of care provided to America's home health patients. We provide evidence-based tools, timely data reports, and a wealth of ongoing educational opportunities to home health practitioners directly providing patient care and allied partners with a stake in improving the quality of care that home health patients receive. Members who have been diagnosed with Diabetes and is enrolled in a PPB Plan.	The HHQI National Campaign is an initiative of the Centers for Medicare & Medicaid Services (CMS) and is executed under contract by WVMI & Quality Insights, a Charleston-based non-profit organization dedicated to improving health care across the nation.	Since 2007, WVMI & Quality Insights has led the Centers for Medicare & Medicaid Services' efforts to improve home health care quality as prime contractor for the Home Health Quality Improvement (HHQI) National Campaign special innovation project. We are assisting home health providers who serve a high proportion of dual-eligible and health disparate patients through the creation of the Underserved Populations (UP)/Local Area Network (LAN) that features targeted communications, webinars and the provision of one-on-one technical assistance. We facilitate virtual and grassroots networking and training through high-profile Webinars, teleconferences, and podcasts that have netted thousands of participants. Nearly 11,000 unique individuals representing over 5,600 CMS-certified home health agencies participate on a voluntary basis. We have produced evidence-based multimedia educational resources that have netted more than 90,000 tracked downloads in the since August 2010. All of our resources are absolutely free and available to everyone. Individualized performance data and technical assistance in a secure online environment is provided for more than 5,000 registered HHQI Data Access users and the creation and launch of the groundbreaking Home Health Cardiovascular Data Registry allowing secure transmission of patients' data to receive unique cardiovascular health reports that highlight specific opportunities to improve preventive cardiovascular care.	Recent analysis clearly demonstrated that the project has delivered a nearly 13-to-1 return on investment for CMS by reducing avoidable hospitalizations among participating home health agencies.	Cardiovascular Disease, Care Coordination, Care Transitions, Data Collection or Analysis, Disease Prevention, Education, Health Education, Health Literacy, Health Promotion, Home Care, Integration of services, Patient Family Engagement, Prevention, Quality Improvement, Quality Measurement, Research	Underserved Populations		Statewide	Federal Grant	Centers for Medicare & Medicaid Services (CMS)		
Face to Face Diabetes Program	Amber	Harper	Public Employees Insurance Agency	amber.d.harper@wv.gov	304-558-7850	www.peiaf2f.com	601 57th Street, S.E. Suite 2	Charleston	25304	2004		PEIA offers this Program to members who have been diagnosed with Diabetes. Participants meet with a Program provider to receive health information related to Diabetes. The participant must commit time and effort in order to learn more about the disease and follow recommendations to keep them healthy. A benefit of participation is waived co-payments on some diabetes related medications, supplies and labs.	Fewer emergency room visits and controlled Diabetes.	Access to Care, Cost Control, Diabetes, Disease Prevention, Disease Treatment, Education, Food, Health Education, Health Promotion, Pharmacy / Pharmacist Services, Physical Activity, Public Health, Wellness Programs	Pharmacy, Physician offices		Statewide	Internal Funding				
Rural Health Initiative	Laura	Boone	Higher Education Policy Commission	lboone@hepc.wvnet.edu	304-558-0530	whhepc.com	1018 Kanawha Boulevard East	Charleston	25301	1991	health profession students at the states 3 academic health centers, underserved communities, k-12 and undergraduate students, existing healthcare providers in underserved communities	Primarily, Joan C. Edwards School of Medicine, West Virginia School of Osteopathic Medicine, West Virginia University Health Sciences Center Secondly, community health centers and private healthcare practices where students rotate and the communities and providers associated with these sites, k-12 and undergraduate schools where there is an interest in bringing in pipeline activities	Rural Health Initiative is administered by the Higher Education Policy Commission and is focused on four main goals: 1) recruitment of healthcare providers to underserved areas 2) retention of healthcare providers in underserved areas 3) engaging communities in the health education process and 4) development and offering of healthcare pipeline programs. Majority of funding is granted in equal amounts to the state's 3 academic health centers. HEPC holds back a small amount to use for program administration, fund the statewide housing system that students on rural rotations can use, and give out mini grants (\$10-\$30,000 range to organizations (ie community health centers, other health profession programs, nonprofits) who are working on projects that meet the above stated goals.	Performance of the goals stated above.	Access to Care, Care Delivery, Community Environment, Education, Engaging Employers, Health Education, Workforce	recruitment and retention, pipeline activities	Allied Health Program, Community, Elementary Schools, FQHC / RHC, Medical or Osteopathic School, Nursing School, Pharmacy, Pharmacy School, Physician offices, State Agency, University	Statewide	Internal Funding	State code section, State appropriation to HEPC and money granted out from HEPC	2,000,000	
Health Sciences Scholarship Program	Laura	Boone	Higher Education Policy Commission	lboone@hepc.wvnet.edu	304-558-0530	whhepc.com	1018 Kanawha Boulevard East	Charleston	25301	1995	Health professions students in their final year of education who wish to practice in underserved areas of West Virginia. Includes: medicine, dental, pharmacy, licensed clinical social workers, doctoral psychologists, nurse practitioners, physician assistants, physical therapists, nurse midwives, nurse educators.	Administered by HEPC Division of Health Sciences. We work with program contacts at each of the schools (both public and private) that offer these types of training programs.	Program makes approximately 15-20 awards a year. Medical students and dentists receive \$20,000. All other disciplines receive \$10,000. In exchange for this cash award (so they can spend it on anything they like; not required to pay back loans with the award), participants commit to practice two years in an underserved area of the state. Program emphasis is on out patient primary care settings.	Improve the recruitment and long term retention of practitioners to underserved areas of the state.	Access to Care, Behavioral Health Integration, Care Delivery, Engaging Employers, Physician services, Workforce	Provider recruitment and retention to underserved areas.	Behavioral Health Agency, FQHC / RHC, Free Clinics, Home, Hospice, Nursing Home, Nursing School, Pharmacy, Physician offices, Veterans Administration Site	physical therapy practices	Statewide	Internal Funding	Funded through state budget appropriation for HEPC	220,000
Drug Free Moms and Babies	Janine	Breyel	West Virginia Perinatal Partnership	jbreyel@hsc.wvu.edu	304-216-3437	wvperinatal.org	1018 Kanawha Boulevard East, Suite 1100	Charleston	25301	2012	Substance using pregnant women and their newborns	Benedum Foundation, Bureau for Behavioral Health, Office of Maternal, Child and Family Health, as well as public and private health care providers around the state.	The Drug Free Moms and Babies Project is a comprehensive and integrated medical and behavioral health program for pregnant and postpartum women. The project supports healthy baby outcomes by providing prevention, early intervention, addiction treatment, and recovery support services. Key aspects of the Drug Free Moms and Babies Project include: • Screening, Brief Intervention, Referral and Treatment (SBIRT) services integrated in maternity care clinics • Collaboration with community partners for the provision of comprehensive medical, behavioral health, and social services • Long term follow up for two years after the birth of the baby provided by a recovery coach. In addition, home visits and other services to help women maintain sobriety and access needed resources are provided. • Program evaluation of effective strategies for identifying women in need, preventing addiction and abuse, treating women with substance abuse problems, and delivering recovery coaching services. • Provider outreach education to other maternity care clinics in West Virginia to facilitate the duplication of successful model programs. In 2012, the West Virginia Perinatal Partnership awarded funding to four pilot project sites. • Shenandoah Valley Medical Systems, Inc. – A federally qualified community health center that serves a three county area in the Eastern Panhandle of the state. Its rural patient population comes from surrounding counties in West Virginia, Maryland and Virginia. • Thomas Memorial Hospital – A private, non-profit community hospital located in South Charleston that serves a twelve county area in the southwestern part of the state. • Greenbrier Valley Medical Center – A small, rural hospital located in Ronceverte that serves six West Virginia counties and one county in Virginia. • West Virginia University Ob-Gyn Department – A large, tertiary center located in Morgantown that serves women from all over the state, as well as women from southwestern Pennsylvania, western Maryland, and eastern Ohio.	Expected outcomes include lowering the incidence of substance exposed newborns, prevention of substance exposed pregnancies and the development of models for this population that can be replicated by other maternity programs around the state.	Access to Care, Behavioral Health, Behavioral Health Integration, Care Coordination, Cost Control, Integration of services, Prevention, Public Health, Quality Improvement, Social Support Services, Substance Abuse & Mental Health	FOHC / RHC, Hospital, Physician offices	Berkeley County, Greenbrier County, Kanawha County, Monongalia County	Federal Grant, State Grant, Private Grant	Benedum Foundation, Bureau for Public Health (OMCFH) and Bureau for Behavioral Health	480,000		
Childhood Lead Poisoning Prevention	Kathy	Cummons	DHHR/BPH/OMCFH	kathy.g.cummons@wv.gov	304-356-4388		350 Capitol Street Room 427	Charleston	25301	1994	Children ages 1 to 6	Children With Special Health Care Needs WV Poison Control Center Office of Environmental Health Services	Identify children ages 1-6 who may have a blood lead level result of equal to or greater than 10mcg/dl. These children receive follow-up to ensure they are rescreened and followed by a physician to reduce their blood lead level. For children with a blood lead level of 15 mcg/dl or higher, a referral is made to the Office of Environmental Health Services and a home visit is scheduled to determine the cause of the poisoning. Education is offered to community through events.	Reduce the incidence of childhood lead poisoning.	Care Coordination, Children, Community Environment, Data Collection or Analysis, Disease Prevention, Disease Treatment, Education, Health Education, Prevention, Public Health	Physician offices, State Agency	Kanawha County	Federal Grant	Title V	70,000		
Infant and Maternal Mortality Review Team	Kathy	Cummons	DHHR/BPH/OMCFH	kathy.g.cummons@wv.gov	304-356-4388	www.wvdhhr.org/mcfh	350 Capitol Street Rppm 427	Charleston	25301	Maternal Mortality Review Team in 2008 and then combined with Infant Mortality Review in 2011	Infants who die within one year of their birth and pregnant women who die during pregnancy or within one year after giving birth.	Vital Registration Office of the Medical Examiner Birthing Facilities Obstetrical physicians WV Medical Schools WV State Medical Association The Director of Obstetrics, the Director of the Neonatal Intensive Care Unit and the Director of Pediatrics at each of the tertiary care hospitals in the state. WV Nurses Association WV Society of Osteopathic Medicine WV Academy of Family Physicians WV Chapter of the American College of Nurse Midwives WV Chapter of the American Academy of Pediatrics	To study the causes of infant and maternal deaths to develop plans to avoid these deaths in the future.	Identifying and studying the causes of infant and maternal deaths and develop plans to reduce the number of annual deaths.	Care Delivery, Data Collection or Analysis, Health Education, Prevention, Public Health, Quality Improvement, Research, Primary	State Agency	Kanawha County	Federal Grant, State Grant	State dollars/Title V	100,000		

West Virginia Well-Integrated Screening and Evaluation for WOMen Across the Nation (WISEWOMAN)	Sheryn Carey	WVDHHR/BPH/OMCFH/DPW/H/WVBCCSP/WISEWOMAN	Sheryn.L.Carey@wv.gov	304-356-4345	www.wisewoman.org	350 Capitol Street	Room 426	Charleston	25301	WISEWOMAN was a research project from 2003-2008 and has been a screening and lifestyle Program since 2009	WISEWOMAN serves uninsured or underinsured women aged 40-64 who are enrolled in the state's Breast and Cervical Cancer Screening Program (BCCSP).	WV BCCSP	The WISEWOMAN Program focuses on reducing cardiovascular disease (CVD) risk factors among high-risk women. Addressing risk factors such as high blood pressure, elevated cholesterol, obesity, inactivity, diabetes and smoking greatly reduces a woman's risk of CVD-related illness and death.	The Program has CDC-established performance measures, which are: Submission of minimum data elements data files on schedule and with no more than a 5% error rate. Number of partnerships with community based organizations and state and governmental entities that result in promotion of and support for increased physical activity, access to healthy food choices, smoking cessation and elimination of exposure to second-hand smoke. Evidence that clinical preventive services are delivered and CDC approved screening goals are met. Evidence that risk reduction counseling and appropriate referrals were provided. Evidence of follow up to risk reduction counseling, including call backs for women with high blood pressure, and follow up to determine participation in lifestyle program and/or referrals. Evidence can be shown through MDEs and/or other data sources reported to CDC. Proportion of women who are referred to a lifestyle program. Proportion of women who participate in a lifestyle program. Proportion of women who complete	Cardiovascular Disease, Disease Prevention, Health Education, Health Promotion, Prevention, Public Health	Lifestyle/Behavior Change Chronic Disease Self-Management	FOHC / RHC, Free Clinics, Local Health Department	Brooke County, Cabell County, Grant County, Greenbrier County, Harrison County, Jefferson County, Kanawha County, Marion County, Monongalia County, Ohio County, Randolph County	Federal Grant	Centers for Disease Control and Prevention (CDC)	620800	
Right From The Start Program	Terra Hoff	OMCFH/PWH/BPH	Terra.B.Hoff@wv.gov	304-356-4427	www.wvdhhr.org/rfts/	350 Capitol Street	Room 427	Charleston	25301	1989 prenatal 1990 infants	Medicaid eligible pregnant women and infants up to the age of 13 months.	Right From The Start contracts with an average of 60 community agencies who employ 168 Designated Care Coordinators who provide the services for the program throughout West Virginia. Right From The Start is also involved with collaborations from several other state and community programs such as the WV Home Visitation Program, WIC, Birth to Three, the Perinatal Partnership and OB providers.	Right From The Start is a statewide home visitation program in West Virginia committed to improving birth outcomes for low-income pregnant women and their families. Right From The Start providers are registered nurses and licensed social workers, known as Designated Care Coordinators (DCCs) who work and reside in the communities they serve. The Right From The Start Program follows evidence-based curricula with fidelity to ensure that home visiting is precisely replicated in all West Virginia communities, leading to improved outcomes for both mothers and children.	The following are outcomes for women who choose to participate in the Right From The Start Program: 1) Less likely to use tobacco and alcohol during their pregnancy. 2) Women are more likely to carry their infants past 37 weeks gestation. 3) Infants born with healthier birth weights. 4) Women are less likely to deliver infants who are at-risk for developmental delay. 5) Pregnancies resulting in fewer High Score infants. 6) Fewer infants admitted to the NICU. 7) Women more likely to exclusively breast feed. 8) Higher rate of linking high birth score infants with a healthcare provider.	Access to Care, Behavioral Health Integration, Care Coordination, Care Delivery, Care Transitions, Children, Communications, Community Environment, Data Collection or Analysis, Diabetes, Disease Prevention, Education, Food, Health Education, Health Literacy, Health Promotion, Home Care, Home Monitoring, Hospital Services, Integration of services, Local Government, Medical Homes, Oral Health, Patient Family Engagement, Patient Safety, Physician services, Prevention, Public Health, Quality Improvement, Social Support Services, Substance Abuse & Mental Health, Wellness Programs	Community, Free Clinics, Home, Local Health Department, Medical Homes, Public Health, Secondary Schools, Social Service Agency, State Agency	Statewide	Federal Grant, State Grant	WV Medicaid/OMCFH	4,890,561.70		
Family Planning	Tisha Gay Reed	WVDHHR/BPH/OMCFH/DPW/H/FPP	tisha.g.reed@wv.gov	304-356-4400	http://www.wvdhhr.org/r.org/fpp	350 Capitol Street	Room 427	Charleston	25301-3714	1970	The target population is adults (both male and female) capable of conception at or below 25% of the federal poverty level, typically those age 15-44.	152 clinical sites including local health departments, federally qualified health centers, college and university health centers, and 501C3 clinics; WVFREE; the March of Dimes; the Perinatal Partnership; Oregon Planned Parenthood; the Office of Population Affairs; the National Training Centers; the New Morning Foundation; the National Coalition of STD Directors; Division of STD, HIV and Hepatitis; Office of Laboratory Services; Pennsylvania Cytology Services; Breast and Cervical Cancer Screening Program; Right From the Start	In 1970, Congress enacted Title X (ten) of the Public Health Service Act, the only federal program - then and now - devoted solely to the nation-wide provision of family planning services. The Title X program, administered by the U.S. Department of Health and Human Services, Office of Population Affairs, awards grants to approximately 85 delegate agencies in all 50 states, Puerto Rico, the U.S. Virgin Islands, and the Pacific Basin to make contraceptive supplies and services available to persons who want and need them but are unable to afford them without government assistance. Since 1970, the West Virginia Bureau for Public Health, Office of Maternal, Child and Family Health, Family Planning Program has been the sole Federal Title X grantee in West Virginia. Services provided may include: clinical breast exam and instruction on monthly self-exam, testicular exam and instruction on self-exam, screening and treatment for some sexually transmitted diseases (STD, Pap test and pelvic exams performed beginning at age 21, menstrual/sexual history, pregnancy testing, free contraceptive methods (all FDA approved contraceptive types are provided. Additionally, health education and counseling of several types such as: how pregnancy occurs, birth control methods, behaviors that place people at risk for getting STD including HIV, reproductive life planning, pregnancy options, resisting pressure to engage in sexual activities, preconception counseling and the benefits folic acid before becoming pregnant, basic infertility information, and follow-up and referral for identified medical needs.	The program helps to avoid unintended pregnancies that save the state approximately \$3.84 for every \$1 spent on the services provided. The Family Planning program serves approximately 50,000 clients annually. These centers served 42% of women in the state in need of publicly supported contraceptive services and supplies, compared with 25% served by such centers nationally. According to the Guttmacher Institute in 2010, contraceptive services provided at Title X-supported centers in West Virginia helped women avoid 11,600 unintended pregnancies.	Access to Care, Data Collection or Analysis, Disease Prevention, Disease Treatment, Education, EHRs, Health Education, Integration of services, Medical Homes, Mobile Phones / Smart Phones, Payment methodology, Physician services, Prevention, Public Health, Quality Improvement, Quality Measurement, Wellness Programs	Reproductive Life Planning and contraceptive care	FOHC / RHC, Free Clinics, Hospital, Local Health Department, Medical Homes, Physician offices, Public Health, State Agency, University	Statewide	Federal Grant, State Grant, Internal Funding	Office of Population Affairs	7,000,000	
West Virginia Partnership for Elder Living	Phil Schenk	West Virginia Partnership for Elder Living	pschenk@wvpel.org	304-542-2116	wvpel.org	6 Chansum Place		Elkview	25071	2009	Professionals in the various fields of aging services and care.	We have over 25 partner organizations including all major aging service/care agencies.	The Partnership for Elder Living brings professionals in the field together in work groups to assess, analyze, and strategize around issues of importance to allow West Virginia elders to age with dignity and purpose. WVPEL also provides small grants to further the knowledge of aging services. We also commission special reports on the various issues.	Improved policy in relation to elder services and care in West Virginia.	Access to Care, Care Coordination, Care Delivery, Care Transitions, Data Collection or Analysis, End of Life care, Engaging Employers, Health Promotion, Home Care, Integration of services, Long term care services, Medical Devices, Medical Homes, Mobile Phones / Smart Phones, Payment methodology, Practice Transformation, Quality Improvement, Quality Measurement, Research, Research, Applied, Social Support Services, Technology, Telehealth, Workforce	Allied Health Program, Community, FOHC / RHC, Free Clinics, Home, Hospice, Hospital, Local Health Department, Medical Homes, Nursing Home, Secondary Schools, Social Service Agency, State Agency, University	Statewide	Private Grant		175,000		
Provider recruitment	Martha Endres	Division of Rural Health and Recruitment/Office of Community Health Systems and Health Promotion/Bureau for Public Health	Martha.w.endres@wv.gov	304-356-4217	http://www.wvchshp.org/OCHSHPDivisions/RuralHealthandRecruitment/tabid/1919/Default.aspx	350 Capitol Street	Room 515	Charleston	25301	1995	I recruit physician assistants, nurse practitioners, certified nurse midwives, dentists, and physical therapists to sites in the state.	Primary care centers, hospitals, rural health centers, private physicians' offices, local health departments, free clinics, prisons, and VA medical centers.	We maintain a data base of job openings and of candidates looking for positions in the state. We refer candidates to opportunities and we tell site contacts about the candidates. Our goal is to start a dialogue between a prospective employer and candidates for the job. We are a free service of tax dollars. Sites can save money by using us instead of a private for-profit "headhunter". We speak to students in medical school to let them know that we can help them find jobs when they are ready to practice.	Expected outcomes are to facilitate communication among health care providers and employers. Actual outcomes are placements of clinicians whom we have referred at sites which are recruiting providers.	Access to Care, Behavioral Health, Community Environment, Oral Health, Workforce	Behavioral Health Agency, Community, FOHC / RHC, Free Clinics, Hospital, Local Health Department, Medical or Osteopathic School, Physician offices, Veterans Administration Site	Statewide	State Grant				
Family Alzheimer's In-Home Respite (FAIR)	Nancy Cipoletti	WV Bureau of Senior Services	nancy.j.cipoletti@wv.gov	304-558-3317	www.wvseniorservices.gov	1900 Kanawha Blvd. E.		Charleston	WV	2006	Individuals with Alzheimer's disease or a related dementia and their family caregivers	All 55 county aging providers	FAIR provides socialization and stimulation for the person with dementia and gives the family caregiver a regular break from the responsibilities of caregiving. Trained workers, employed by county aging providers, spend time one-on-one with individuals with Alzheimer's and related dementias, giving family caregivers a much needed break. Families can receive up to sixteen hours of service per week. Payment is on a sliding fee scale, based on the income of the care receiver (the person with dementia).	Outcomes for family caregivers: reduced stress, ability to provide care longer Outcomes for individuals with Alzheimer's or a related dementia: able to delay or avoid placement, short term outcome - increased socialization, better quality of life	Alzheimers Disease, Education, Home Care	Respite Socialization	Home	Adult daycare centers	Statewide	State Grant	WV Lottery	3,000,000
Fostering Healthy Kids Project	Alisha Gary	DHHR/BPH/OMCFH/ICAH	Alisha.N.Gary@wv.gov	304-356-4357		350 Capitol St RM 427		Charleston	25301	September 2010	Children in foster care	Children with Special Health Care Needs WV HealthCheck Bureau of Children and Families	Once a child in foster care has had an Early and Periodic Screening, and Diagnosis and Treatment (EPSDT) by a physician. Medical information is also added to the child's record in FACTS which the child's official foster care record. The screen is forwarded to Registered Nurses with the Children with Special Health Care Needs (CSHCN) Program to determine if the child is healthy, acute or chronic. If a child is found to be chronic after a medical review as well as speaking with the foster parents the child is referred to CSHCN to receive Care Coordination services. Care Coordination Services consists of but is not limited to: Assisting the family in understanding the child's medical condition and treatment. Coordinating medical care for the child and assisting in finding medical care for other family members. Understanding health insurance benefits. Identifying the social service needs of the family and assisting with referrals and finding resources to meet those needs. Assisting the child and family with educational issues. Transitioning to adulthood.	The goal of the Fostering Healthy Kids Project is to ensure that all children placed in foster care receive screening, diagnosis and treatment of health problems before they become complex.	Access to Care, Care Coordination, Children, Patient Family Engagement, Social Support Services	Community, Free Clinics, Home	Clay County, Kanawha County, Roane County	Private Grant				
Lighthouse	Kimberly Thompson	WV Bureau of Senior Services	kimberly.k.thompson@wv.gov	304-558-3317		1900 Kanawha Blvd., East		Charleson	25305	2007	1. 60 years and older. 2. Medically eligible-Two needs must be identified under "Activities of Daily Living" 3.	Services are provided in WV by the Senior Services of each county.	The Lighthouse Program is designed to assist those seniors who have functional needs in their homes. The Lighthouse Program provides support in four areas: 1. Personal Care 2. Mobility 3. Nutrition 4. Environment	To assist seniors who have functional needs in their homes.	Home Care	Home	Statewide	State Grant	State of WV-Administered by the WV Bureau of Senior Services	8,800,000		

WV Aging and Disability Resource Centers (ADRCs)	Jenni	Sutherland	West Virginia Bureau of Senior Services	Jenni.L.Sutherland@wv.gov	304-558-3317	www.wveseniorcenters.gov	WV Bureau of Senior Services	1900 Kanwha Blvd. east	Charleston	25305	2003	Seniors and adults 18 and older with physical, intellectual or mental health disabilities	Area Agencies on Aging, Take Me Home, WV through the Bureau for Medical Services	The West Virginia ADRCs are visible and trusted places where people can turn for information on the full range of long-term care support options, as well as assistance in accessing these options. The centers offer consumers reliable information to help them make informed choices for themselves and their loved ones.	Consumers will have the information needed to make informed choices regarding long-term care service options which will increase utilization of home and community based service options over facility based care.	Access to Care, Care Coordination, Care Transitions, Social Support Services	Information and Assistance, Options Counseling	Community, Social Service Agency	Statewide	Federal Grant, State Grant	Administration for Community Living	700,000
Violence and Injury Prevention	Michelle	O'Bryan	DHHR/BPH/OMCFH/ICAH	michelle.LoBryan@wv.gov	304-356-4464		350 Capitol Street Rm 427		Charleston	25301	September 2010	Lifespan, Statewide	West Virginia University, Injury Control Research Center; WV Council for the Prevention of Suicide; Office of Perinatal Programs; WV Emergency Medical Services for Children; Prevent Child Abuse WV; WV Department of Education; WV Division of Motor Vehicles; WV Foundation for Rape Information and Services; WV Prosecuting Attorneys Institute; WV State University; WV Statistical Analysis Center	The WV Violence and Injury Prevention Program applies a multi-level, public health approach through collaboration and coordination of efforts across programs to prevent injury and death of residents.	Coordination of prevention activities to maximize resources and eliminate duplication of effort. Increased collaboration across programs. Increased public awareness of violence and injury epidemic. Increased knowledge and skills of the prevention workforce in WV. Uniform data collection and dissemination. Increase in evidence-based program use.	Access to Care, Behavioral Health Integration, Care Coordination, Care Delivery, Care Transitions, Children, Communications, Community Environment, Cost Control, Data Collection or Analysis, Disabilities, Education, Health Education, Health Promotion, Hospital Services, Integration of services, Local Government, Medical Devices, Medical Homes, Mobile Monitoring, Mobile Phones / Smart Phones, Oral Health, Patient Family Engagement, Pharmacy / Pharmacist Services, Physician services, Prevention, Public Health, Quality Improvement, Quality Measurement, Research, Research, Applied, Research, Primary, Social Support Services, Substance Abuse & Mental Health, Technology, Telehealth, Wellness Programs, Workforce	Community, Elementary Schools, Free Clinics, Home, Hospital, Local Government, Local Health Department, Pharmacy, Physician offices, Public Health, Secondary Schools, Social Service Agency, State Agency, University	Statewide	Federal Grant, State Grant	CDC; DOJ; WVDHHR	1,000,000	
Appalachian Diabetes Coalitions	Richard	Crespo	Marshall University School of Medicine	crespo@marshall.edu	304-691-1193	applachiandiabetescoalitions.org		1600 Medical Center Dr		Huntington	2000	Distressed counties in the Appalachian Region	75 county-level diabetes coalitions Division of Diabetes Translation, CDC Appalachian Regional Commission Bristol-Myers Squibb Foundation	The Appalachian Diabetes Coalitions project involves 75 county-level coalitions in ten Appalachian states. Its purpose is to prevent and control diabetes through developing coalitions in rural poor counties for people living in Appalachia. The project helps coalitions organize around the problem of diabetes, including planning, implementing and evaluating their specific projects. The community projects help people with type 2 diabetes control their disease and prevent the disease in people who may be at risk.	In 2013 over 25,000 people participated in sustained physical activity programs. 10,415 people participated in healthy eating programs. 2,222 glucose screenings 4,917 blood pressure screenings 715 A1c screenings The coalitions generated \$435,955 in cash and in-kind contributions	Access to Care, Behavioral Health, Community Environment, Diabetes, Disease Prevention, Food, Health Education, Health Literacy, Health Promotion, Home Monitoring, Mobile Monitoring, Obesity, Patient Family Engagement, Physical Activity, Prevention, Public Health, Wellness Programs	Community, Elementary Schools, Local Health Department, Public Health	Calhoun County, Fayette County, Gilmer County, Jackson County, Lincoln County, Logan County, McDowell County, Mingo County, Roane County, Taylor County, Wirt	Federal Grant, Private Grant	Division of Diabetes Translation, CDC; Appalachian Regional Commission, Bristol-Myers Squibb Foundation	600,000	
Office of Epidemiology and Prevention Services	Loretta	Haddy	DHHR/BPH/OEPS	Loretta.E.Haddy@wv.gov	304-356-4007	www.wvdhhr.org/oeps	350 Capitol Street, room 125		Charleston	25301	1927	All WV citizens	??	OEPS mission of tracking the occurrence of diseases, providing preventive interventions, and educating the public on protecting themselves from diseases.	Disease surveillance to prevent and control further transmission of notifiable conditions.	Data Collection or Analysis, Disease Prevention, Disease Treatment, EHR/HIE, Health Education, Health Promotion, Integration of services, Prevention, Public Health, Research, Applied, Technology	State Agency	Statewide	Federal Grant, State Grant	CDC and HRSA plus state budget funds	22,000,000	
Newborn Hearing Screening Project (NHS)	Tennysa	Mace	BPH/DHHR/OMCFH	tennysa.f.mace@wv.gov	304-558-5388	www.wvdhhr.org/nhs	350 Capitol Street, Room 427		Charleston	25301	2000	Infants and expecting and new parents/guardians of infants.	NHS obtains hospital hearing screening information from the Birth Score Office (BSO), which also completes the initial follow-up with families and with Right From The Start (RFTS) as in home care coordination providers for infants who do not pass a second hearing screening and need further evaluation. NHS refers families and infants to Birth To Three (BTT) and the WV School for the Deaf and Blind (WVSDb) Birth to Five Outreach Program for early intervention, Children with Special Health Care Needs (CSHCN) for potential medical assistance, and WV Hands & Voices for parent to parent support and community involvement.	NHS works to ensure that all infants are screened for hearing loss, receive further audiological evaluation if needed, and enroll in early intervention if needed. We work with hospitals to maintain high initial screening rates. Families are contacted shortly after hospital discharge when an infant does not pass or misses the initial screen so that we can offer them support and guidance through the process. If an infant does not pass the second hearing screening, the family has the option of having an in-home care coordinator assist them through the diagnostic process. When an infant is diagnosed with hearing loss, NHS refers the family to BTT, CSHCN, WVSDb, and WVH&V. NHS also works with medical providers, physicians and audiologists, to work toward a cohesive system of delivery of services. We also engage in education of families, medical providers, and the community in an effort to help others understand the potential impact of undiagnosed hearing loss on development and the importance of early intervention.	NHS strives to meet the infant hearing screening goals set by Healthy People 2020, the 1-3-6 guidelines, which state that infants will be screened for hearing loss before one month of age, receive audiological evaluation by three months of age, and enroll in early intervention before six months of age.	Access to Care, Care Coordination, Care Delivery, Care Transitions, Children, Data Collection or Analysis, Disabilities, Health Education, Health Literacy, Hospital Services, Integration of services, Medical Homes, Patient Family Engagement, Physician services, Quality Improvement, Social Support Services	Community, Home, Hospital, Medical Homes, Physician offices	Statewide	Federal Grant	HRSA	200,000	
Right From The Start Maternity Services Project	Jeannie	Clark	WVDHHR/BPH/Office of Maternal, Child and Family Health	jeannie.m.clark@wv.gov	304-356-4395	www.wvdhhr.org/rfts	350 Capitol Street, Room 427		Charleston, WV 25301		1988	Pregnant women who are uninsured or underinsured for obstetrical care.	Limited funding of prenatal, delivery, postpartum, and routine newborn hospital care for low-income, medically-indigent pregnant women who are determined to be ineligible for Medicaid, have no insurance to cover obstetrical care, and have a monthly income below 185% of the Federal Poverty Level. The women are also eligible for home visitation care coordination provided by Registered Nurses and Licensed Social Workers through the Right From The Start Program.	Pregnant women who have no coverage for obstetrical care will be able to access routine prenatal and postpartum services which will help to improve birth outcomes in this low income population.	Access to Care, Care Coordination, Care Delivery, Children, Education, Health Education, Health Promotion, Home Care, Home Monitoring, Integration of services, Patient Family Engagement, Prevention, Public Health, Social Support Services	Community, Home, Hospital, Local Health Department, Physician offices, Public Health, Social Service Agency, State Agency	Statewide		WVDHHR	1,280,935.00		
Newborn Screening	Kathy	Cummons	DHHR/BPH/OMCFH	kathy.g.cummons@wv.gov	304-356-4388	www.wvdhhr.org/mcftv	350 Capitol Street Room 427		Charleston	25301	1965	Newborns	Office of Laboratory Services WVU Pediatrics/Genetics WVU Birth Score Office Birthing Facilities Midwives Pediatricians Pediatric Specialists	Newborns are screened by blood spots from a heel stick prior to being discharged from the hospital for a multitude of newborn disorders that when identified and treated early can prevent medical/mental issues and even death. The blood spots are sent to the State Lab. Abnormal results are sent to the Newborn Screening Program follow-up nurses and to the pediatrician. The follow-up nurses ensure that the infant receives a repeat screening and an appropriate referral to a pediatric specialist if indicated. The follow-up nurse also ensures that those babies identified with a disorder that needs medical supplements as part of their treatment (not covered by insurance) receives them.	Identification of treatable medical disorders soon after birth to ensure appropriate treatment to prevent medical problems, mental retardation and even death.	Access to Care, Care Coordination, Children, Data Collection or Analysis, Disease Prevention, Disease Treatment, Education, Health Education, Integration of services, Prevention, Public Health	Hospital, Physician offices, Public Health, State Agency, University	State Lab	Kanawha County	Revenue Generating. Hospitals are billed a fee for each infant born in their facility. Hospitals are then reimbursed by the insurance company.	2,147,670	
KEYS 4 HealthyKids	Laura	Dice	KEYS 4 HealthyKids	laura.dice@camc.org	304-388-7145	www.keys4healthykids.com	PO BOX 1547		Charleston	25326	December 2008	children	WVU Extension, WVSU Extension, WV Food and Farm Coalition, Bureau of Public Health, Coventry Cares, Robert Wood Johnson Foundation, Kidz Bite Back, Change the Future WV, Choose to Change	KEYS 4 HealthyKids has a mission to reduce childhood obesity through policy, system and environmental change. KEYS established a School and Youth Garden Support Network with West Virginia University Extension. Through this network, KEYS created 14 school gardens and developed an educational curriculum to complement the gardens. We work with childcare centers to improve nutrition and physical activity policies and environments. On a statewide level, we work to empower communities to create healthy environments through natural playgrounds and gardens.	The KEYS initiative, with funding through Healthy Kids, Healthy Communities, has not only been able to establish successful efforts in two Charleston neighborhoods, it also evolved beyond the city's boundaries. In fact, the KEYS approach has now spread into other Kanawha County towns and throughout the broader region of Central West Virginia, thanks to ongoing investment from funders such as Benedum Foundation, Greater Kanawha Valley Foundation, Bureau of Public Health, WVU Extension, WVSU Extension, Coventry Cares and many others. The provision of optimal pediatric preventive health care based on current nationally accredited research-based standards of practice Accomplishment of EPSDT's administrative requirements for the targeted population	Children, Community Environment, Diabetes, Disease Prevention, Food, Health Education, Health Promotion, Obesity, Physical Activity, Prevention, Public Health, Wellness Programs	Elementary Schools, Public Health	Statewide, Clay County, Kanawha County, Lincoln County, Mingo County, Putnam County	Federal Grant, State Grant, Private Grant	WVU Extension	300,000	
HealthCheck Program	James	Jeffries	DHHR/BPH/OMCFH Infant, Child and Adolescent Health	James.E.Jeffries@wv.gov	304-356-4425	www.dhhr.wv.gov/healthcheck	350 Capitol Street, Room 427		Charleston	25302	1973 in WV's Title V Agency	Medicaid eligible West Virginia children and youth (up to 21 years of age) who have poverty-level income, receive Supplemental Security Income, or receive foster care or adoption assistance WV Medicaid providers	Bureau for Medical Services Bureau for Children and Families	Identify all Medicaid eligible individuals up to 21 years of age. Using a combination of written and oral methods, effectively inform (per 42 U.S.C. § 1396a(a)(43)(A)) all Medicaid eligible individuals up to 21 years of age (including those individuals who are blind or deaf, or who cannot read or understand the English language) who are not enrolled in a managed care organization (or their families) about the EPSDT benefit, including the advantages of preventive pediatric health care and health services and assistance (counting transportation) available Provide follow-up to ensure that Medicaid eligible individuals up to 21 years of age who are not enrolled in a managed care organization receive the medically necessary services to diagnose/treat conditions that are discovered by personal physicians or primary care providers (PCPs) during EPSDT initial, periodic, or interperiodic screening Familiarize WV Medicaid providers with the American Academy of Pediatrics' Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents and provide ongoing technical assistance regarding the EPSDT benefit and Medicaid processes	The WVBCSP is funded by CDC and provides access to free Pap tests, pelvic exams, breast exams and mammograms for eligible women in WV. Services are provided by a network of about 350 screening and referral providers throughout the state. Promotion of population-based activities for education, awareness and outreach to ensure early detection and treatment of breast and cervical cancer. WVBCSP also oversees the WV Diagnostic and Treatment (D&T) Fund to provide certain diagnostic and treatment services not covered by the federal CDC grant and the Nurse Case Management/Patient Navigation component of the WV Medicaid Treatment Act for eligible women diagnosed with breast or cervical cancer.	Access to Care, Autism, Care Coordination, Care Delivery, Children, Education, EHR/HIE, EHR/Registries, EHRs, Health Education, Health Promotion, Medical Homes, Patient Family Engagement, Physician services, Prevention	Community, Medical Homes, Physician offices, State Agency	Statewide	Internal Funding	Bureau for Medical Services	1,400,000.00	
WV Breast and Cervical Cancer Screening Program	GeorgeAnn Grubb		BPH/OMCFH/PWH/Breast and Cervical Cancer Screening Program	Georgeann.Grubb@wv.gov	304-356-4396	wvdhhr.org/bccs	WVDHHR 350 Capitol Street, Room 427		Charleston	25301	1991	Women, ages 21-64 who are uninsured/underinsured/low-income, WV residents	Centers for Disease Control and Prevention, WV Comprehensive Cancer Coalition (Mountains of Hope), WV WISEWOMAN, Bureau for Medical Services, WV Family Planning Program, WVU Mary Babb Randolph Cancer Center, Komen	The WVBCSP is funded by CDC and provides access to free Pap tests, pelvic exams, breast exams and mammograms for eligible women in WV. Services are provided by a network of about 350 screening and referral providers throughout the state. Promotion of population-based activities for education, awareness and outreach to ensure early detection and treatment of breast and cervical cancer. WVBCSP also oversees the WV Diagnostic and Treatment (D&T) Fund to provide certain diagnostic and treatment services not covered by the federal CDC grant and the Nurse Case Management/Patient Navigation component of the WV Medicaid Treatment Act for eligible women diagnosed with breast or cervical cancer.	Reduced incidence of and mortality from breast and/or cervical cancer and improved quality of life for WV women.	Access to Care, Care Coordination, Care Delivery, Care Transitions, Cost Control, Data Collection or Analysis, Disease Prevention, Disease Treatment, Education, Health Education, Health Promotion, Integration of services, Patient Family Engagement, Payment methodology, Prevention, Public Health, Quality Improvement, Quality Measurement	FQHC / RHC, Free Clinics, Hospital, Local Health Department, Medical Homes, Physician offices, Public Health, University	Statewide	Federal Grant, State Grant	CDC; OMCFH-Medicaid/D&T Fund (WV Legislative Budget line-item)	5,000,000	

Oral Health Program	Jason	ROush	WVDHHR/BPH/OMCFH	jason.m.rous h@wv.gov	304-558-5388		350 Capitol Street	Room 427	Charleston	25301			WV residents	West Virginia University Marshall University Oral Health Coalition West Virgina Dental Association West Virginia Board of Dentistry West Virginia Dental Hygiene Association	The mission of the West Virginia Department of Health and Human Resources (DHHR), Office of Maternal, Child and Family Health (OMCFH), Oral Health Program (OHP) is to promote and improve the oral health of all West Virginians. The goals of the Program are to provide preventive education, improve access to oral health care, and monitor the oral health status of the citizens across the state. The OHP is comprised of the Donated Denture, Pre-Employment, Oral Disease Prevention, Fluoride Rinse, Oral Health Education, Fluoride Varnish, Fluoride Water Testing and Dental Workforce Projects, and Oral Health Surveillance all under the direction of the State Dental Director.	To promote and improve the oral health of all West Virginians through oral health education, promotion and prevention strategies.	Access to Care, Children, Disease Prevention, Health Education, Health Promotion, Oral Health, Prevention, Public Health, Telehealth, Workforce	Community, Elementary Schools, FQHC / RHC, Local Health Department, Medical Homes, Medical or Osteopathic School, Nursing School, Physician offices, Public Health, Secondary Schools, State Agency, University	Dentist offices Dental School	Statewide	Federal Grant, Private Grant	CDC, HRSA	
Women's Right To Know	Denise	Smith	Bureau for Public Health, OMCFH, Perinatal and Women's Health	denise.a.smith h@wv.gov	304-356-4397	www.wvdhhr.org/ wrk	350 Capitol Street, Room 427		Charleston	25301	2002	Pergnant women in West Virginia.	Termination providers, Health Statistics Center	In accordance with West Virginia Code §16-21-1, et seq., known as the Women's Right to Know Act (WRTK), enacted in 2002, requires informed consent for an abortion to be performed and requires certain information to be supplied to women considering abortion. The WRTK law establishes a minimum waiting period after women have been given the information. The law specifies exception for medical emergencies and requires physicians to report abortion statistics. Further, the WRTK law requires DHHR to publish printed information and develop a website on alternatives to abortion. The legislation protects privacy in court proceedings, exempts certain information from disclosure, and establishes administrative remedies, civil remedies, and penalties. Abortion procedures are reported to DHHR, Bureau for Public Health, Health Statistics Center using Report of Induced Termination of Pregnancy (ITOP) forms.	Provision of all options to a pregnant woman; prenatal care, adoption or termination.	Access to Care, Data Collection or Analysis, Education, Physician services, Public Health	FQHC / RHC, Hospital, Medical Homes, Physician offices		Statewide	State		5,000	
WV Birth Defects Surveillance System	Melissa	Baker	DHHR/BPH/OMCFH	melissa.a.bak er@wv.gov	304-356-4438	http://www.wvdh r.org/mcfh/	350 Capitol St.	Room 427	Charleston	25301	2002	children up to age 6 identified with a congenital abnormality	Vital Statistics	A statewide birth defects information system for the collection of information concerning congenital anomalies.	Identify and describe congenital anomalies, to detect trends and epidemics in congenital anomalies, quantify morbidity and mortality of congenital anomalies and abnormal conditions of newborn, stimulate epidemiological research regarding congenital anomalies, identify risk factors for congenital anomalies, facilitate intervention in and prevention of congenital anomalies, facilitate access to treatment for congenital anomalies, inform and educate the public about congenital anomalies.	Children, Data Collection or Analysis, Disabilities, Education, Health Education, Public Health, Research	Public Health		Statewide	Internal Funding	OMCFH	0	
Adolescent Pregnancy Prevention Initiative	Deena	Ellison	WV DHHR/BPH/OMCFH/Perinatal and Women's Health/Family Planning	deena.s.elisso n@wv.gov	304-356-4426	www.wvdhhr.org/ appi	350 Capitol Street	Room 427	Charleston	25301	1999	Adolsecents	APPI is a statewide initiative. APPI works with private and public organizations to reach WV teens. These include: WV Department of Education, public schools and colleges, Boys and Girls Clubs, Children's Home Society, Kanawha Institute on Social Research and Action, Mission WV, Mountain Heart, statewide Family Resource Networks and Centers, Adolescent Health Initiative, Regional School Wellness Specialists, Students Against Destructive Decisions, Partners in Prevention, Youth and Day Report Centers.	APPI influences and supports teens as they explore and determine responsible sexual and reproductive options for the future. The goal of the program is to reduce the number of pregnancies among adolescents using an abstinence based approach which includes: encouragement of reproductive life planning, improvement of decision-making skills, development of refusal skills and delaying techniques, and information regarding access to family planning services (including contraceptive methods.) Every member of the APPI staff is fidelity-trained by the publisher to use Center for Disease Control and Prevention (CDC) identified evidence-based curricula. APPI Staff members are also trained-to-train other educators to teach these curricula. APPI administers the Federal Personal Responsibility Education Program Grant. APPI works with Family Planning Providers to aid in efforts to make Family Planning Clinics teen friendly and easily accessible to adolescents.	On average APPI reaches 15,000 WV students per year with age appropriate, medically accurate comprehensive sexuality education. Personal Responsibility Education Program Grantees reach an additional 1,000 students per year using only evidence based curricula.	Disease Prevention, Education, Health Education, Prevention	Community, Secondary Schools, University	Statewide	Federal Grant, State Grant	WV DHHR and Federal Administration for Children and Families, Family and Youth Services Bureau	711,245		
PRAMS - Pregnancy Risk Assessment Monitoring System	Melissa	Baker	DHHR/BPH/OMCFH	melissa.a.bak er@wv.gov	304-356-4438	http://www.wvdh r.org/wvprams/ 	350 Capitol St.	Room 427	Charleston	25301	1988	randomly selected women who have recently delivered a live born infant	Vital Statistics	WV PRAMS is a joint research project between the West Virginia Department of Health and Human Resources Office of Maternal, Child and Family Health and the Centers for Disease Control and Prevention (CDC). The project is as an on-going, population-based surveillance system designed to identify maternal attitudes and experiences before, during and after pregnancy. PRAMS provides data not available from other sources about pregnancy and the first few months after birth. This information can be used to identify groups of women and babies at high risk for health problems, to monitor changes in health status and to measure progress towards goals in improving the health of mothers and infants. PRAMS information is also used by state and local governments to plan and review programs and policies aimed at reducing health problems among mothers and babies. PRAMS data are used by West Virginia agencies to identify other agencies that have important contributions to make in planning maternal and infant health programs and to develop partnerships with these agencies.	PRAMS was developed in 1987 by the CDC because infant mortality rates were no longer declining as rapidly as they had in previous years; and the number of low birthweight babies had changed little in the previous 20 years. Research has indicated that maternal behaviors during pregnancy influences infant birthweight and death rates. The goal of PRAMS is to identify maternal risk behaviors that may affect both maternal and infant health.	Access to Care, Behavioral Health, Children, Data Collection or Analysis, Diabetes, Education, Food, Health Education, Health Literacy, Obesity, Oral Health, Payment methodology, Physical Activity, Physician services, Prevention, Public Health, Research, Substance Abuse & Mental Health, Wellness Programs	Public Health		Statewide	Federal Grant	CDC and Title V Block Grant	165000.00	
Grant Improvement	Julie	Palas	GO / GOHELP at DHHR / Sec Off	julie.c.palas @wv.gov	304-558-1641	www.gohelp.wv.g ov/	One Davis Square	Suite 100 E	Charleston	25301	2013	DHHR Bureaus and WV residents/orgniza s	Various organizations and entities partner and receive funds from DHHR.	Improvement of DHHR's grant system, including the CRM database use and increasing networking and grant opportunities, to provide funds and services to WV residents. The project began after the Public Works Assessment with recommendations was published in 2013.	To improve the efficiency of the grant system and increase grant funding.		Improving Grant Systems and Increasing Grant Opportunities	State Agency	Statewide, Kanawha County	Internal Funding	GO and DHHR, budget not yet determined		
Behavioral Health	Cathy	Caruthers	Thomas Health System	cathy.caruthe rs@thomasw v.org	304-766-3441		4805 MacCorkle Avenue, SW			South Charleston WV 25309	Many years ago. I'm not sure of the date.	We have 2 in-patient units. One serves adults with mental health and/or substance abuse problems. The other serves older people who may have cognitive problems along with health problems. There is also an out-patient program where we serve adults with mental health and substance abuse problems. There is	Our out-patient program is known at Beacon/Southway.	We use our in-patient units to stabilize people and get them ready to get back out into the community. Our out-patient program is used for individuals who do not necessarily require in-patient treatment, but who have needs for that lever (IOP) of care. It is also used as a step-down from the in-patient unit at times.	Of course, with regard to the in- patient units, we hope to stabilize the patients to the point that they can return to wherever they came from. With regard to the out-patient program, we hope to help the patients increase their levels of functioning and to decrease symptoms. When there is a substance abuse issue, we also try to get them involved in AA/NA.	Alzheimers Disease, Behavioral Health	Hospital	Kanawha County					
Neonatal Therapeutic Unit	Sara	Murray	CHH/Lily's Place	saram1@aol. com	304-634-3258		PO Box 429		Milton	25541	9/2012	Infants experiencing Neonatal Abstinence Syndrome	Lily's Place	Newborns meeting AAP criteria for monitoring for Neonatal Abstinence Syndrome are observed for 4-7 days. Provide therapeutic handling and caregiver education for caring for these very complex infants. In 1978, the Federal government implemented Health Professional Shortage Area (HPSA) designations as a way to objectively and equitably award financial incentives from the National Health Service Corps to providers working in areas of greatest need. I maintain the mandatory HPSA designation updates and perform elective analyses in order to seek to designate non- designated areas and addresses. I am the point of contact for the federal analysts and the West Virginia sites with their questions.	Expected outcomes are maintaining the updates by the deadline and performing elective analyses. Actual outcomes are submitting all scheduled analyses prior to the deadline and continuously compiling elective analyses.	Behavioral Health, Children, Patient Family Engagement, Patient Safety, Substance Abuse & Mental Health	Hospital	Cabell County					
Medically Underserved Communities: Health Professional Shortage Designation and Medically Underserved Area/Population analyses	Martha	Endres	WVDHHR/Division of Rural Health and Recruitment/Office of Community Health Systems and Health Promotion	Martha.w.end res@wv.gov	304-558-4382	http://www.wvoch shp.org/OCHSH PDivisions/Rural HealthandRecruit ment/tabid/1919/ Default.aspx	350 Capitol St.	Room 515	Charleston	25301	HPSAs in 1978; MUA/Ps in 1976	Health Resources and Services Administration					Access to Care, Behavioral Health, Community Environment, Data Collection or Analysis, Local Government, Oral Health, Physician services, Research, Workforce	Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospital, Local Government, Local Health Department, Physician offices, Public Health	Statewide	Federal Grant	HRSA		

National Health Service Corps Loan Repayment and Scholarship Programs	Martha	Endres	WVDHHR/Rural Health and Recruitment/Community Health Systems and Health Promotion	Martha.w.endres@wv.gov	304-558-4382	http://www.wvohshp.org/OCHSHPDivisions/RuralHealthandRecruitment/tabid/1919/Default.aspx	350 Capitol St.	Room 515	Charleston	25301	1972 (nationally)	Students in medical and dental schools; practicing primary care and mental health physicians; nurse practitioners; physician assistants; certified nurse midwives; certified registered nurse anesthetists; dentists; dental hygienists; psychologists; marriage and family therapists; licensed professional counselors; registered nurses; and psychiatric nurse specialists are the eligible categories for scholarship and/or loan repayment opportunities. Sites PEIA insureds.	Health Resources and Services Administration	I am the lead contact in West Virginia and serve as the state's National Health Service Corps Ambassador to promote participation in these financial incentive programs. The goal of the NHSC scholarship and loan repayment programs is to improve access to care for underserved populations. These monies are offered in exchange for service commitments at sites where there is a great need for primary care, dental, and/or mental health care providers. I speak to groups of medical students; staff conference exhibits; and make presentations at state-wide events to further these endeavors.	The expected outcomes are increased numbers of applications from students and providers in the state and more awards. The actual outcomes are a higher number of applications and a higher number of awards to students and providers in West Virginia. In 2013, there were more than \$1.8 million in awards made to NHSC-obligated providers in West Virginia.	Access to Care, Behavioral Health, Care Delivery, Community Environment, Oral Health, Physician services, Public Health, Workforce	Adding a physician provider to a community produces several hundred thousand dollars of financial activity per year.	Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospital, Local Health Department, Medical or Osteopathic School, Nursing School, Physician offices, Public Health, State Agency, University	Federally Qualified Health Centers; County/city health departments; hospitals; Rural Health Clinics; State and Federal medium and maximum security correctional centers.	Statewide	Federal Grant	Health Resources and Services Administration	
Comprehensive Care Partnership Program	Hilary	Payne	PEIA	hilary.g.payne@wv.gov	304-558-7850	www.peia.wv.gov	601 57th Street SE	Suite 2	Charleston	25304	2012		Program Description: Allows primary care physicians to take a more active role in managing the care of their patients by providing an increased opportunity to prevent disease or ensure appropriate early treatment for illnesses and injury. Key Concepts: •Primary care provider manages health care •Focus on prevention and quality of care •Increased access to provider for member •Provider is paid on a PMPM capitation for enrolled members with shared savings opportunity •Enrolled members have no copayments, deductible or coinsurance for care received at CCP provider	CCP providers will manage care for the enrolled members while focusing on quality, lowering costs over time. The CCP program has 7 provider organizations with 77 individual locations in 19 counties. There are around 4,600 PEIA members currently enrolled in the program.	Care Coordination, Medical Homes, Payment methodology, Physician services, Prevention, Quality Measurement		FQHC / RHC, Medical Homes, Physician offices		Boone County, Braxton County, Cabell County, Clay County, Fayette County, Harrison County, Kanawha County, Lincoln County, Marion County, Mason County, Mingo County, Nicholas County, Pocahontas County, Putnam County, Raleigh County, Randolph County, Upshur County, Wayne County	Internal Funding			
Recrutable Communities Program	Shawn	Baileydyer	Division of Rural Health and Recruitment/OCHSHP/BPH	shawn.g.balle dyer@wv.gov	304-558-4382		350 Capitol Street	Room 515	350 Capitol Street	WV	1998	Rural communities of WV which are currently having issues with recruiting and retaining health care professionals.	HRSA/Federal Office of Rural Health Policy Office of Community Health Systems and Health Promotion Division of Primary Care Division of Healthy Lifestyles West Virginia University Extension Services West Virginia University Research Corp	The Recrutable Community Program (RCP) main objective is to assist rural West Virginia communities recruit and retain health care professionals. This unique program, focus on the community's role in the recruitment and retention of health professionals. The program provides beneficial advice, assessment and suggestions for enhancing community development and recruitment and retention techniques. It also reinforces recruitment and retention efforts by strengthening community ties to training programs and state agencies and funding resources.	Encouraging community involvement, volunteerism and providing education relating to their role in maintaining quality medical care, providing healthy life style information, health care disparities statistics, discussing access to medical transportation, health care assistance programs, elder care and provider recruitment and retention issues is all a part of RCP. The program demonstrates how citizens of the community can contribute and inspire others to create a change in the health environment of the community.	Access to Care, Care Delivery, Community Environment, Data Collection or Analysis, Education, Engaging Employers, Health Education, Health Promotion, Hospital Services, Integration of services, Local Government, Physical Activity, Physician services, Public Health, Quality Improvement, Quality Measurement, Wellness Programs, Workforce		Allied Health Program, Community, FQHC / RHC, Free Clinics, Hospital, Local Government, Medical or Osteopathic School, Physician offices, Public Health, State Agency, University		Statewide	Federal Grant	HRSA/Federal Office of Rural Health Policy	10,000.00
Medical Home Program	Hilary	Payne	PEIA	hilary.g.payne@wv.gov	304-558-7850	www.peia.wv.gov	601 57th Street SE	Suite 2	Charleston	25304	1/1/2007	PEIA insureds		PEIA members are encouraged to designate a primary care provider as their medical home (providers must agree to participate as a medical home provider). Members receive a copayment discount at their designated medical home as an incentive to participate in the program.	The goal of the program is to encourage members to go to their designated medical home as a first point of contact with the health care system. Children in the target group will be able to access quality affordable health care coverage through a pediatric benefit plan that meets the their preventive and wellness care needs.	Medical Homes, Physician services		FQHC / RHC, Physician offices, State Agency		Statewide	Internal Funding	PEIA	
WV Children's Health Insurance Program (WVCHIP)	sharon	carte	WVCHIP	sharon.l.carte@wv.gov	304-558-2732	www.chip.wv.gov	#2 Hale St Suite 101		Charleston	25301	1998	Children from birth through age 19 who reside in households with incomes at 300% FPL or under.	WVDHHR & WV PEIA are both operational business associates	A public health insurance program serving about 37,000 children a year financed with federal and state funds.	Children in the target group will be able to access quality affordable health care coverage through a pediatric benefit plan that meets the their preventive and wellness care needs.	Care Delivery, Children, Medical Homes, Practice Transformation, Quality Measurement		State Agency		Statewide	Federal Grant	CMS	52,000,000
Small Rural Hospital Improvement Program (SHIP)	Shawn	Baileydyer	Division of Rural Health and Recruitment/OCHSHP/BPH	shawn.g.balle dyer@wv.gov	304-558-4382		350 Capitol Street	Room 515	350 Capitol Street	WV	1999	Small rural hospitals and their communities.	HRSA/Federal Office of Rural Health Policy National Organizations of State Offices of Rural Health	Small Rural Hospital Improvement Grant Program (SHIP) was first authorized by the Balanced Budget Refinement Act of 1999 of the Social Security Act to help small rural hospitals meet the costs of implementing data systems required to meet requirements of the Medicare Prospective Payment System (PPS). The purpose of the program is to help small rural hospitals of 49 beds or less, and do any or all of the following: 1) enable the purchase of equipment and/or training to help hospitals attain value-based purchasing provision in the Patient Protection and Affordable Care Act (ACA), 2) aid small rural hospitals in joining or becoming accountable care organizations, or create shared savings programs per the ACA, and 3) enable small rural hospitals to purchase health information technology, equipment and/or training to comply with meaningful use, ICD-10 standards, and payment bundling.	Each eligible hospital can receive up to \$9,000 each to purchase technical assistance, services, training/education and purchase technology. Efforts to reduce medical errors and support quality improvement should be part of a plan or initiative; expenditures should not be used for routine equipment replacement or capital improvements.	Access to Care, Care Delivery, Communications, Data Collection or Analysis, Education, EHR/HIE, EHRs, Health Education, Health Promotion, Hospital Services, Integration of services, Patient Safety, Prevention, Quality Improvement, Quality Measurement, Technology, Telehealth, Wellness Programs, Workforce		Community, Hospital, State Agency		Statewide	Federal Grant	HRSA/Federal Office of Rural Health Policy	200,000.00
Rural Hospital Flexibility Program	Shawn	Baileydyer	Division of Rural Health and Recruitment/OCHSHP/BPH	shawn.g.balle dyer@wv.gov	304-558-4382		350 Capitol Street	Room 515	350 Capitol Street	WV	1997	Critical Access Hospitals (CAH) their communities and catchment areas.	Federal Office of Rural Health Policy National State Office of Rural Health Center for Medicaid and Medicare Services National Rural Health Resource Center Technical Assistance and Services Center WV Hospital Association CAH Network	The Medicare Rural Hospital Flexibility Program (Flex) is a federal funding program designed to improve and sustain access to appropriate and quality health care services in rural areas. Flex was created by the Balanced Budget Act of 1997 replacing the Essential Access Community Hospital (EACH) Program. In February 1998, West Virginia became the first state in the nation to receive approval from the Centers for Medicaid and Medicare Services (CMS) to implement the Flex Program. The primary focus of the Flex Program is on the (1) development of an initial State Rural Health Plan (SRHP) and (2) conversion of eligible health care facilities to CAH status. Since then, the program has shifted its focus to sustaining quality rural health care infrastructures wherein CAH facilities serves as the hub of an organization system of health care. Projects funded under the Flex program include those that center around: •Development and implementation of a SRHP; •Performance and quality improvement within the rural health care system; • Supporting CAH facilities; • Program evaluation; • Integration of EMS; and •Networking	West Virginia came into the Program with six rural hospitals, previously certified as Rural Primary Care Hospitals under the former EACH (Essential Access Community Hospital) Program. Once approval was received to implement the West Virginia Flex Program, all six hospitals were successfully designated by the state and certified by the CMS as Critical Access Hospitals (CAHs). Since then, the West Virginia Flex Program has grown to include a total of 19 CAHs all around the State.	Access to Care, Care Coordination, Care Delivery, Care Transitions, Cost Control, Education, EHR/HIE, EHRs, Hospital Services, Integration of services, Quality Improvement, Quality Measurement, Telehealth, Workforce		Community, Hospital, State Agency		Statewide	Federal Grant	HRSA/Federal Office of Rural Health Policy	500,000.00
Not Applicable	John	Earles		jearles1050@suddenlink.net	304-855-1050	www.loganhealthcarefoundation.com	P. O. Box 1725		Logan	25601		The Logan Healthcare Foundation operates in the Southern West Virginia Counties of Boone, Lincoln,	This role works to support 130 programs within the Bureau for Public Health (BPH) and their public relations and consumer education needs. This position works under the direction of Department of Health and Human Resources Office of Communications and is a public health advisor for BPH administration.	The Public Information Officer works with Public Information Specialists in the Office of Epidemiology and Prevention Services (2), the Center for Threat Preparedness (1), and the Office of Community Health Systems and Health Promotion (1). Work includes drafting education materials for health care providers and the public; press correspondence; and informational materials internally for programs. Public Information Specialists support their programs in all aspects of public information needs. The Public Information Officer is one part of the approval process for programs within the Bureau for Public Health.	N. A.				Boone County, Lincoln County, Logan County, Mingo County	Private Grant, Internal Funding			
Bureau for Public Health Communications (Public Information Officer)	Toby	Wagoner	Bureau for Public Health (Administration)	Toby.D.Wagoner@wv.gov	304-356-4042	www.dhhr.wv.gov/bph	350 Capitol Street Room 702		Charleston		September 2013	The Public Information Officer helps promote the vision and mission of the Bureau for Public Health to the people of West Virginia.	This position works to support 130 programs within the Bureau for Public Health (BPH) and their public relations and consumer education needs. This position works under the direction of Department of Health and Human Resources Office of Communications and is a public health advisor for BPH administration.	The Public Information Officer works with Public Information Specialists in the Office of Epidemiology and Prevention Services (2), the Center for Threat Preparedness (1), and the Office of Community Health Systems and Health Promotion (1). Work includes drafting education materials for health care providers and the public; press correspondence; and informational materials internally for programs. Public Information Specialists support their programs in all aspects of public information needs. The Public Information Officer is one part of the approval process for programs within the Bureau for Public Health.	Communicating the vision of the Bureau for Public Health which is to have healthy West Virginians in healthy communities. The Mission is to help shape the environments within which West Virginians in their communities can be safe and healthy. Explaining that a community can be as small as a neighborhood or as large as the entire State. In fulfilling this Mission, the Bureau embraces communicates the values of community, science and evidence-based decision making, health equity, prevention and wellness, and the protection and improvement of the health of all West Virginians. This is how we are successful.	Communications, Health Education, Health Promotion		Public Health, State Agency		Statewide			
State Office of Rural Health	Meissa	Wheeler	OCHS-HP Bureau for Public Health Division of Rural Health & Recruitment	melissa.s.wheeler@wv.gov	304-356-4254		350 Capitol Street Room 515		Charleston		1993	Population of the State of West Virginia.	Natinal Rural Health Association; National Organization State Office of Rural Health; WV Higher Education Policy Commission; WVU School of Medicine; Marshall University School of Medicine; WV School of Osteopathic Medicine; FQHCs; state-wide hospitals; and numerous other stakeholders.	Provide update information on rural health issues, and to recruit healthcare providers in a state-wide endeavor.	To place qualified healthcare providers in areas of highest need in West Virginia. To strengthen the healthcare safety-net throughout the state.	Access to Care, Behavioral Health, Cardiovascular Disease, Care Delivery, Children, Diabetes, Disease Prevention, Disease Treatment, Health Promotion, Hospital Services, Oral Health, Pharmacy / Pharmacist Services, Physician services, Research, Workforce		Community, FQHC / RHC, Free Clinics, Hospital, Medical or Osteopathic School, Physician offices, University		Statewide	Bureau of Health Services HRSA	1454047	

PEIA Weight Management Program	Nidia	Henderson	WV Public Employees Insurance Agency	Nidia.L.Henderson@wv.gov	304-558-7850	www.wvpeia.com	601 57th St	Suite 2	Charleston	2004	Persons with a BMI of 25 or greater, or for a woman a waist circumference of 35 inches or more; or for a man, 40 inches or more.	- WVU College of Physical Activity and Sport Sciences - 70 fitness centers across WV	Provides services from dietitians and exercise professionals at approved fitness centers. Individualized programming involving medical nutrition therapy,lifestyle coaching and exercise training.	Improved cardiovascular health, weight loss, etc.	Cardiovascular Disease, Diabetes, Disease Prevention, Obesity, Physical Activity		Fitness facilities	Berkeley County, Boone County, Cabell County, Fayette County, Greenbrier County, Harrison County, Jackson County, Jefferson County, Kanawha County, Lewis County, Marion County, McDowell County, Mercer County, Mingo County, Monongalia County, Ohio County, Putnam County, Raleigh County, Roane County, Summers County, Upshur County, Wayne County, Webster County, Wood	PEIA covered benefit	2,000,000			
Coordinated School Health	Teresa	Mace	Bureau for Public Health	teresa.l.mace@wv.gov	304-356-4225		350 Capitol Street	Room 223	Charleston	25301	1990's	School age children	West Virginia Department of Education	This program acts as liaison between WVDHHR and WVDE and chairs the Coordinated School Public Health Partnership (CSPHP). The CSPHP's scope of work focuses on providing support to county school systems in their efforts to address health concerns such as substance abuse, bullying, teen pregnancy and suicide, as well as other health-related issues like healthy social/emotional development, adolescent immunizations, increased physical activity and managing chronic disease through the eight components of coordinated school health and a community school framework. A number of WVDHHR programs combine funding to fund a network of eight (8) Regional School Wellness Specialists who provide professional development and technical assistance directly to regions, counties and schools for health-related issues and concerns, and work to make community connections for the schools.	To improve the health and well-being of West Virginia's children.	Access to Care, Asthma, Behavioral Health, Behavioral Health Integration, Care Transitions, Children, Community Environment, Diabetes, Disease Prevention, Education, Food, Health Education, Health Promotion, Integration of services, Medical Devices, Obesity, Oral Health, Physical Activity, Physician services, Prevention, Public Health, Social Support Services, Substance Abuse & Mental Health, Wellness Programs	Elementary Schools, Secondary Schools	Pre-School Head Start	Statewide	Federal Grant	CDC	56,500	
Recruitment & Retention Community Project	Karen	Pauley	WVDHHR/BPH/OCHSHP/Division of Rural Health & Recruitment	karen.k.pauley@wv.gov	304-558-4382		350 Capitol Street	Room 515	Charleston	25301	1989	Medical Professionals working in medically underserved areas of West Virginia	The Recruitment & Retention Community Project assist in loan repayment for medical professionals working in medically underserved areas of West Virginia	Recruitment and retention of medical professionals in rural West Virginia	Access to Care, Behavioral Health, Care Coordination, Care Delivery, Community Environment, End of Life care, Engaging Employers, Health Education, Health Promotion, Hospital Services, Local Government, Long term care services, Medical Homes, Oral Health, Pharmacy / Pharmacist Services, Physician services, Prevention, Public Health, Wellness Programs, Workforce	Allied Health Program, Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospice, Hospital, Local Health Department, Medical or Osteopathic School, Pharmacy, Pharmacy School, Physician offices, Public Health, University	Statewide	Internal Funding	WV Primary Care Office	269000			
Tobacco Cessation Program of the Division of Tobacco Prevention	Bruce	Adkins	BPH / OCHSHP / Division of Tobacco Prevention	Bruce.W.Adkins@wv.gov	304-356-4203	www.wvntp.org	350 Capitol Street, Room 514		Charleston	2002	Tobacco Users, Nicotine- Addicted Residents of the State of WV	beBetter Health Networks WVU - School of Dentistry WV Hospital Association Marshall University School of Medicine	The Cessation Program's mission id to educate tobacco users of the dangers of tobacco use and to provide successful, proven means to quit. The West Virginia Tobacco Cessation Outline is one of the most successful quotelines in the country.	As above	Alzheimers Disease, Asthma, Behavioral Health, Cardiovascular Disease, Care Delivery, Communications, Community Environment, COPD, Cost Control, Diabetes, Disabilities, Disease Prevention, Disease Treatment, Education, Health Education, Health Literacy, Health Promotion, Home Care, Oral Health, Pharmacy / Pharmacist Services, Physician services, Prevention, Public Health, Wellness Programs, Workforce	Allied Health Program, Behavioral Health Agency, Business/Retail Establishment, Community, Free Clinics, Home, Hospital, Local Government, Local Health Department, Medical Homes, Medical or Osteopathic School, Nursing Home, Nursing School, Pharmacy, Pharmacy School, Physician offices, Public Health, Secondary Schools, State Agency, University, Veterans Administration Site	Statewide	Federal Grant, State Grant	Centers for Disease Control and Prevention - Office on Smoking and Health	1,800,000			
State Loan Repayment Program	Karen	Pauley	WVDHHR/BPH/OCHSHP/Division of Rural Health & Recruitment	karen.k.pauley@wv.gov	304-558-4382		350 Capitol Street	Room 515	Charleston	25301	1989	Medical Professionals in Health Professional Shortage Areas of WV	This program provides assistance in loan repayment to medical professionals in Health Professional Shortage Areas of West Virginia in return for an obligation of one to two years.	Recruitment & Retention of medical professional in rural WV	Access to Care, Behavioral Health, Care Coordination, Care Transitions, Community Environment, End of Life care, Health Education, Health Promotion, Home Care, Hospital Services, Integration of services, Local Government, Long term care services, Medical Homes, Oral Health, Pharmacy / Pharmacist Services, Physician services, Practice Transformation, Prevention, Quality Improvement, Wellness Programs, Workforce	Allied Health Program, Behavioral Health Agency, Community, FQHC / RHC, Free Clinics, Hospice, Hospital, Local Health Department, Medical Homes, Medical or Osteopathic School, Nursing Home, Pharmacy, Pharmacy School, Physician offices, Public Health, University	Statewide	Federal Grant	HRSA-Bureau for Health Professionals- State Loan Repayment Program	300000			
Clean Indoor Air Program of Division of Tobacco Prevention	Bruce	Adkins	BPH / OCHSHP / Division of Tobacco Prevention	Bruce.W.Adkins@wv.gov	304-356-4203	www.wvntp.org	350 Capitol Street, Room 514		Charleston	2012	All residents, visitors of the State of West Virginia	Local Health Departments Regional Network of 10 lead agencies and 10 coordinators across the State	The mission of the Clean Indoor Air Program is to significantly reduce and eliminate exposure to secondhand tobacco smoke (known to cause significant and serious illness an disease).	As above	Asthma, Cardiovascular Disease, Children, Community Environment, COPD, Disease Prevention, Disease Treatment, Education, Engaging Employers, Health Education, Health Literacy, Health Promotion, Hospital Services, Local Government, Mobile Monitoring, Oral Health, Prevention, Public Health, Quality Improvement, Wellness Programs, Workforce	Community, Elementary Schools, Free Clinics, Home, Hospital, Local Government, Local Health Department, Medical or Osteopathic School, Nursing Home, Nursing School, Pharmacy, Pharmacy School, Public Health, State Agency, University, Veterans Administration Site	Statewide	Federal Grant, State Grant	Centers for Disease Control and Prevention - Office on Smoking and Health	1,600,000			
Quality Clinical Health Care Analytics for West Virginians	Alan	Ducatman	West Virginia University	alan.ducatman@gmail.com	304-293-3142	http://directory.hsc.wvu.edu/UserDetails/29183	West Virginia University	School of Public Health	Morgantown	26506-9190	2013	1. Hospitals 2. Comprehensive Clinics 3. Clinicians 4. Hospital Administrators 5. Insurers 6. Government Payers and agencies 7. Patient advocacy groups 8. Community coalitions	1. We have collaborations with Jefferson and Ruby Hospitals 2. We have some support from the Claude Worthington Benedum Foundation.	Clinical Analytics for Improved Care Submitted by Alan Ducatman, MD and Barbara Ducatman, MD ADucatman@hsc.wvu.edu BDucatman@hsc.wvu.edu Our Goal: we plan to provide our partners with the capability to improve how doctors order and interpret test. Our Vision is simple: improved care, equal or better patient safety, less cost or waste. Our Creed: Patients, providers, and health care organizations benefit from strong teams who can work together to improve how we order and interpret the tests that drive clinical decision making. We can improve, we will improve, and we are determined to do both with strong data that you can analyze for yourself. In addition, we believe that the progress energizes organizations for other strong collaborations. Please see detailed data in uploaded information.	1. Improved care processes. 2. Improved patient safety 3. Lower cost of care, consistent with "Choosing Wisely" goals. 4. Strong organizational collaborations for care processes.	Cardiovascular Disease, Care Delivery, Communications, Cost Control, Data Collection or Analysis, Diabetes, Disease Prevention, Disease Treatment, Education, EHR/HIE, EHR/Registries, EHRs, Engaging Employers, Hospital Services, Integration of services, Practice Transformation, Prevention, Quality Improvement	Data Analytics Statewide coalitions	Hospital, Medical or Osteopathic School, Public Health	Outpatient clinic(s) Urgent Care Community Hospital(s)	Statewide, Berkeley County, Harrison County, Jefferson County, Monongalia County	Private Grant	Benedum Foundation	
Evaluating Changes in Knowledge beliefs and behaviors related to HPV following and educational program among women	Crystal	Sheaves	WVU SON	csheaves@hsc.wvu.edu	304-573-6963		3110 MacCorkle Ave. SE		Charleston	25304	2013	18-26 year old women	WV Immunization Network (WIN)	Dissertation research evaluating an educational program addressing HPV knowledge, beliefs, and behaviors	Will access 200 women for the study, providing education on HPV and HPV prevention with the hope that more women will become immunized against HPV.	Data Collection or Analysis, Disease Prevention, Education, Health Education, Prevention, Research	Community, FQHC / RHC, Local Health Department, Physician offices, University	Statewide	Private Grant		5600.		

Women's Health Initiative	Crystal	Sheaves	WVU SON	csheaves@hsc.wvu.edu	304-573-6963		3110 MacCorkle Ave SE	Danese	25831	May 2014 through June 2014	18-65 year old women in Southern WV who are in need of women's health screening exams. In addition, the program will target the community for blood pressure screening, adult immunization rates, health education, and assist Low income children and adults who are unable to access dental care/treatment.	Rainelle Medical Center WIN network WVU SON	4 remote locations are targeted and Bonnies Bus will be set up. Women's health exams and mammograms will be offered. In addition, a mini-health fair will be conducted at the sites for health education, blood pressure screening, adult immunizations, and access to signing up for the "marketplace" insurance.	We expect to provide a minimum of 100 women's health exams, and to outreach additional members of the 4 remote locations for other services listed above.	Access to Care, Disease Prevention, Education, Health Education, Health Promotion, Prevention	Community	Fayette County, Nicholas County, Summers County	State Grant	DHHR	2500.		
Oral Health Program	Mary Beth	Shea	Mid-Ohio Valley Health Department	marybeth.e.shea@wv.gov	304-485-7374	www.movhd.com	211 Sixth Street	Parkersburg	26101	December 2007	Low income children and adults who are unable to access dental care/treatment.	Blennerhassett Dental Society Wood and Roane County Schools Marshall University School Based Technical Assistance Center WVDHHR Oral Health Program Sisters of St. Joseph Charitable Fund The Claude Worthington Benedum Foundation Parkersburg Area Community Foundation National Children's Oral Health Foundation Mod-Ohio Valley Health Dept.(MOVHD)Women, Infant's and Children (WIC) and Clinical Departments.	Provide Oral Health outreach and education across the lifespan. Early Smiles, First Dental Visit-provides parent education/guidance, screening and preventive treatment to children ages 1-5 who have never seen a dentist. Aid in establishing a dental home. School based portable prevention program. Target students in grades 1-5 who have never seen a dentist or who have not seen a dentist in over 1 year. Screening, data collection, education, preventive treatment and case management to aid in establishing a dental home. Preventive treatment consists of cleaning, fluoride treatment and dental sealants if appropriate. Smiles for Life Adult Screening and Referral Program. Provides "most needed" dental treatment to low income adults. Public Health Practice Permit Dental Hygienists, provide screenings. Health history, BP, Oral cancer, x-ray, chart existing conditions, educate, provide oral health supplies and place adults 18 and over with area dentist who volunteers service from their private office. Data collection and case management take place. Safety net, proof of income, low no-show rate for volunteering dentists, teledentistry for records. Reduction in Emergency Room visits for dental pain and infection. Resource for other health services.	Education, prevention when possible, elimination of dental pain and infection for better overall health, improved attendance at school and work. Better able to seek employment with a healthier mouth.	Access to Care, Care Coordination, Children, Communications, Community Environment, Cost Control, Data Collection or Analysis, Disease Treatment, Education, Health Education, Health Literacy, Health Promotion, Local Government, Mobile Monitoring, Oral Health, Patient Family Engagement, Prevention, Public Health, Technology, Telehealth	Local Health Department	Community, Elementary Schools, Local Health Department, Public Health	Wood and Wirt Counties left out on listing below.	Pleasants County, Ritchie County, Roane County	Private Grant		190,000
WV Health Data Portal	Debrin	Jenkins	WV Rural Health Association	debrinrwhea@gmail.com	304-890-7017	www.wvrha.org	WVRHA	PO Box 11362	Charleston	25339	January 16, 2014	Everyone having an interest in current easily accessible data about rural health in West Virginia. The site has public areas and the deepest levels are only accessible by WVRHA members. This is how we cover the cost to update and expand it yearly. It is currently, being used for grant writing, policy, legislation, referral, disaster planning, education and economic development.	The National Center for the Analysis of Health Care Data is our consultant.	This portal provides current rural health workforce supply and demand data (via county and zip code level) about West Virginia physicians (MD and DO), physician assistants (MD and DO) nurse practitioners, nurses, dentists, dental hygienists, pharmacists, FQHC clinics, hospitals, education programs, drive time between locations for referral and access assessments. The portal also allows the user to custom design color maps or spreadsheets with the requested information. WVRHA has made a commitment to update the information each year and to increase the content so that users may obtain current data in a cost efficient way at one site in a user friendly manner. The WV Health Data Portal is free to anyone, with deepest levels (to the zip code level) available to only WVRHA members via encrypted user name and pass code so that we may determine the amount of users and the location of the user.	That this hard data is used by the public, educators, health science students, WVRHA members, policy/decision makers and legislators to allot funding and develop programs to effectively and efficiently address the issues facing the provision of quality and accessible health care to rural West Virginians. WVRHA believes this information is very important to health departments and to homeland security for disaster planning.	Access to Care, Behavioral Health, Behavioral Health Integration, Cardiovascular Disease, Care Coordination, Care Delivery, Care Transitions, Children, Communications, Cost Control, Data Collection or Analysis, Diabetes, Disease Treatment, Education, Engaging Employers, Health Education, Hospital Services, Integration of services, Local Government, Oral Health, Patient Safety, Pharmacy / Pharmacist Services, Physician Services, Practice Transformation, Public Health, Quality Improvement, Quality Measurement, Research, Research, Applied, Research, Primary, Social Support Services, Substance Abuse & Mental Health, Technology, Workforce	Summer of 2014 will see an expansion of the WV Health Data Portal to include statewide information on psychiatrists, psychologists, social workers, speech therapists, occupational and physical therapists, ob/gyn, podiatrists, ophthalmologists and several other disciplines.	Allied Health Program, Business/Retail Establishment, Community, FQHC / RHC, Free Clinics, Hospice, Hospital, Local Government, Local Health Department, Medical or Osteopathic School, Nursing Home, Nursing School, Pharmacy, Pharmacy School, Physician offices, Public Health, Social Service Agency, State Agency, University	Once telemedicine is expanded in WV, this tool would be very valuable. It is also a great economic development tool as it will instantly inform companies seeking to "open" in WV the availability of health care in a particular county or area. Students going in to health care can assess the amount and type of competition within a county/location to determine the location of a practice or the availability of specific staff. Realtors may use the portal to identify certain demographic locations that new health care grads would like to purchase or rent housing. Attorneys could access the	Statewide	Private Grant, Internal Funding	100000
Patient Centered Medical Home	Dana	King	Department of Family Medicine, WVU Morgantown	kingdana@wvuhealthcare.com	304-598-6920	http://medicine.hsc.wvu.edu/famned/	One Medical Center Dr	Box 9152	Morgantown	26506	2012	Employees of WVU Healthcare and patients of the Sleeth Family Medicine Center at WVU Morgantown	The PCMH initiative is a practice transformation project in WVU Family Medicine. The program uses multidisciplinary care, case management, and population health to improve quality, reduce cost, and improve the patient experience. Three case managers assess patients, refer them to local resources, educate patients, remind patients, counsel patients, and coordinate care for 100-125 patients each. The patients are people who are frequent utilizers of the hospital or Emergency Department, or who are referred by their doctor. The program is tracked, monitored, and enhanced by monthly team meetings, monthly performance review meetings, integration with electronic medical record systems, and an emphasis on changing care to improve quality.	The program has resulted in lower hospital admission rates (15% reduction), reduced readmissions within 30 days (15%), doubling of colon cancer screening rates, improved quality (#2 in the state according to Highmark Blue Cross for 2013) and a transformed culture of care and change in the practice.	Access to Care, Behavioral Health, Behavioral Health Integration, Cardiovascular Disease, Care Coordination, Care Delivery, Care Transitions, Cost Control, Diabetes, Disease Prevention, Disease Treatment, Education, EHRs, Health Education, Home Care, Hospital Services, Integration of services, Medical Homes, Obesity, Patient Family Engagement, Pharmacy / Pharmacist Services, Physician services, Prevention, Quality Improvement, Quality Measurement, Wellness Programs	We have also developed a Medical Home Fellowship training program to train the next generation of physician leaders in how to lead and develop medical homes and population health initiatives.	Medical Homes, Medical or Osteopathic School, Physician offices	More detail, graphs, reports, and results can be provided on request.	Monongalia County	NA		300,000
WV Center for Nursing Scholarship Programs	Chris	Ross	WV Center for Nursing	cross@hepc.wvnet.edu	304-558-0838	http://wvcenterfor nursing.org/	1018 Kanawha BLVD E	STE 700	Charleston	25301		Nursing students studying to become: LPNs, RNs, MSN/Doc, and LPN Communities, Children, Families	Regional Family Resource Network (RFRN) collaborates with a variety of interested persons, groups, or organizations with common goals and interests in order to carry out various programs.	Provide various scholarship opportunities for nurses in WV. All details can be found using this link. The application packet is also posted to the website. http://www.wvcenterfornursing.org/scholarships	Recruit and retain nurses to the state of WV.	Education	Nursing School, State Agency	Statewide				
	Michele	Bowles	Regional Family Resource Network	executivedirector@regionalfrn.org	304-414-4470	www.regionalfrn.org	1078 Main Street	Room 202		Elkview 25071		Regional Family Resource Network (RFRN) collaborates with a variety of interested persons, groups, or organizations with common goals and interests in order to carry out various programs.	Regional Family Resource Network (RFRN) of Boone, Kanawha, and Putnam Counties supports and promotes the collaboration of all citizens in order to develop strategies for communities to succeed. RFRN participates in a variety of activities aimed at maximizing a community's potential through assessing needs and problem solving, without providing direct services.	Access to Care, Behavioral Health, Children, Community Environment, Data Collection or Analysis, Health Education, Health Promotion, Physical Activity, Prevention, Social Support Services, Substance Abuse & Mental Health, Wellness Programs		Behavioral Health Agency, Community, Elementary Schools, Home, Secondary Schools, Settings	Boone County, Kanawha County, Putnam County	Federal Grant, State Grant				
WVU Center for Excellence in Disabilities (CED)	Melina	Danko	WVU Center for Excellence in Disabilities (CED)	mdanko@hsc.wvu.edu	304-293-4692	www.cedwvu.org	959 Hartman Run Road		Morgantown	26505	1978	University students in multiple disciplines; direct care providers who serve persons with disabilities, policy makers, individuals with disabilities and their families	The mission of the CED is to provide leadership in the development of services and supports for persons with disabilities in West Virginia.	CED personnel augment training/education programs throughout the University, to prepare a state and national workforce to serve persons with disabilities. This training enhances the professional curriculum by creating awareness about the needs of a subset of the population. Training offerings include disability etiquette, Not Your Standard Patient, and a Minor or Certificate in Disability Studies. The Center also advocates for public policy at state and national levels that promote independence, empowerment and inclusion for people with disabilities.	Access to Care, Autism, Behavioral Health, Care Coordination, Disabilities, Education, Health Education, Health Promotion, Medical Homes, Patient Family Engagement, Quality Improvement, Research, Social Support Services, Technology	Community, Home, University	Statewide	Federal Grant, State Grant	U.S. Department of Health and Human Services, Administration for Community Living, Administration on Intellectual Disabilities.	6,000,000		
Traumatic Brain Injury Program	Jennifer	Tenney	WVU Center for Excellence in Disabilities (CED)	jtenney@hsc.wvu.edu	304-293-4692	www.cedwvu.org	959 Hartman Run Road		Morgantown	26505	2001	Survivors of Traumatic Brain Injuries, families, caregivers, agencies, policy makers, and the general public	WV Department of Health and Human Resources	The Center for Excellence in Disabilities is the governor's designated lead agency for Traumatic Brain Injury (TBI) services in WV. Our program provides resource coordination services to survivors of Traumatic Brain Injury, their family and caregivers. The TBI program also reaches out to community members, policy makers, agency staff, and the general public regarding the prevention of Traumatic Brain Injuries.	To assist as many West Virginians with Traumatic Brain Injuries locate and access resources within their communities to assist with transition to community living after a Traumatic Brain Injury.	Access to Care, Community Environment, Disabilities, Education, Prevention, Social Support Services	Behavioral Health Agency, Elementary Schools, Home, Hospital, Local Government, Secondary Schools, Social Service Agency, State Agency, University, Veterans Administration Site	Statewide	State Grant	WV Department of Health and Human Resources	700,000	
WVU- CED Nutrition Services	Monica	Andis	WVU Center for Excellence in Disabilities (CED)	mandis@hsc.wvu.edu	304-293-4692	www.cedwvu.org	959 Hartman Run Road		Morgantown	26505	1990's	Individuals with disabilities and chronic conditions throughout the lifespan	Bureau for Public Health/Office of Maternal Child and Family Health/Department of Health and Human Resources (DHHR)	CED Nutrition Services Program's mission is to improve the quantity and quality of nutrition services to people with disabilities. The Program supports 2 clinical dietitians to offer information, training and resources as well as clinical services. The Program runs the WVU-CED Feeding and Swallowing Clinic for children from birth to 21, who have physical or behavioral feeding problems. We staff the WVU Cleft Lip and Palate Clinic. We provide consultant and clinical services to the Children with Special Health Care Needs (CSHCN) Program, which is the funder, participating in nutrition clinics and offering outpatient nutrition assessments for the CSHCN Program participants. Additionally, we provide preservice training for students in health related disciplines.	Improve access to nutrition services for persons, primarily children with disabilities.	Access to Care, Autism, Care Coordination, Care Delivery, Children, Cost Control, Disabilities, Disease Prevention, Education, Food, Health Education, Integration of services, Medical Homes, Obesity, Patient Family Engagement, Prevention, Public Health, Quality Improvement	Community, Free Clinics, Home, Medical Homes, Physician offices	Statewide	Federal Grant, State Grant	Department of Health and Human Resources (DHHR), Bureau for Behavioral Health & Health Facilities/Division of Intellectual Developmental Disabilities ID/DD, within DHHR		

Green Thumbs, Healthy Joints	Jamie	Hayhurst Marshall	WVU Center for Excellence in Disabilities (CED)	jhayhurst@hs.c.wvu.edu	304-293-4692	www.greenthumb.s.cedwvu.org	959 Hartman Run Road		Morgantown	26505	2007	Individuals with arthritis and multiskeletal disabilities	Bureau for Public Health/Department of Health and Human Resources (DHHR)	Green Thumbs, Healthy Joints provides West Virginia organizations the opportunity to perform community service by making gardening accessible to West Virginians with arthritis. Green Thumbs provides qualifying groups with financial support up to \$1,000 to help cover material costs for construction of raised beds and/or other accessibility modifications for gardens at senior centers, public parks and other locations. Green Thumbs provides technical assistance and support for groups in identifying accessible gardening resources to meet the needs of their community. With part of the grant award, recipients buy ergonomic tools that they can later use in outreach and educational efforts. Partnerships with other community groups are encouraged.	Educating the public about accessible gardening, providing accessible gardening demonstrations, training gardening groups, providing information and assistance services through fact sheets and informational blog	Disabilities, Health Promotion	Community, Nursing Home, Public Health	Statewide	State Grant	WV DHHR, Division of Osteoporosis & Arthritis	40,000	
West Virginia Assistive Technology System (WVATS)	Jamie	Hayhurst Marshall	WVU Center for Excellence in Disabilities (CED)	jhayhurst@hs.c.wvu.edu	304-293-4692	www.wvats.cedwvu.org	959 Hartman Run Road		Morgantown	26505	1993	WVATS is the designated lead agency that works to enhance the lives of all West Virginia residents with disabilities, including older adults and the families of people with disabilities. Families, Children with Special Health Care Needs (CHCN) and other community agencies	Partner/stakeholder agencies include WV Department of Education, WV Bureau for Public Health Threat Preparedness	By providing access to and help with the acquisition of assistive technology devices and services, WVATS can offer West Virginians with disabilities choice, control and independence at home, work, school, play, and in their neighborhoods. Assistive Technology (AT) is any device used to perform tasks that would otherwise be difficult or impossible. These devices can be as complex as computers with screen reading software or as simple as Velcro used in place of buttons or shoe laces. AT services enhance functional well-being for persons who have a disability.	WVATS offers assistive technology equipment loans for trial use, demonstrations and equipment exchanges. WVATS also provides training about assistive technology resources, technical assistance to agencies and information and assistance services through a toll free 800 line.	Children, Community Environment, Disabilities, Education, Engaging Employers, Integration of services, Medical Devices, Physical Activity, Social Support Services, Technology, Workforce	Allied Health Program, Home, Medical Homes, Social Service Agency, University	Statewide	Federal Grant	United States Department of Education	413,000	
WV Family to Family and Parent Network Specialist Program	Todd	Rundle	WVU Center for Excellence in Disabilities (CED)	tarundle@hs.c.wvu.edu	304-293-4692	www.cedwvu.org	959 Hartman Run Road		Morgantown	26505	2009	Families, Children with Special Health Care Needs (CHCN) and other community agencies	WV Parent Training, Inc., WV Department of Health and Human Resources, WV Children with Special Health Care Needs Program	The primary purpose of the Family to Family Program is to assist families and children with disabilities in accessing health care. The Center has a cadre of parents, called Parent Network Specialists (PNS), who have children with disabilities that offer a unique perspective by participating as a team member in the delivery of services by the CHCN Program. The PNS staff are responsible for assisting the team and family at initial home visits and completing an individualized needs assessment. The PNS staff also assist with all educational, vocational and transition services. PNS offer monthly community support groups and outreach activities to assist families and professionals, in accessing, managing care, or other resources for persons with disabilities.	To ensure that children with special health care needs receive appropriate educational, vocational, transitional and health care services by educating parents about advocacy.	Access to Care, Autism, Behavioral Health, Cardiovascular Disease, Care Coordination, Care Delivery, Care Transitions, Children, Community Environment, Data Collection or Analysis, Disabilities, Disease Prevention, Disease Treatment, Education, Engaging Employers, Food, Health Education, Health Literacy, Health Promotion, Home Care, Home Monitoring, Hospital Services, Integration of services, Medical Devices, Medical Homes, Mobile Monitoring, Obesity, Oral Health, Patient Safety, Physician services, Public Health, Quality Improvement, Quality Measurement, Technology, Workforce	Behavioral Health Agency, Community, Elementary Schools, Free Clinics, Home, Medical Homes, Physician offices, Public Health, Secondary Schools, Social Service Agency, State Agency, University	Statewide		HRSA, Department of Health and Human Resources	375,000	
Specialized Family Care Program	Teresa	McCourt	WVU Center for Excellence in Disabilities (CED)	tmccourt@hs.c.wvu.edu	304-720-3200	www.cedwvu.org	4510 Pennsylvania Avenue	Suite B	Charleston,	25302	1981	Adults and children with intellectual and/or developmental disabilities	WVDHHR Bureau for Children and Families, Office of Adult and Children Services	This project recruits, trains, and maintains a network of provider homes that provide loving, family environment in which adults and children with intellectual or developmental disabilities may live in the community.	Long-term, secure family-based housing for people with disabilities.	Autism, Behavioral Health, Children, Disabilities, Home Care, Long term care services, Public Health, Social Support Services, Wellness Programs	Home	Statewide	State Grant	WV Department of Health and Human Resources	800,000	
West Virginia Regional HIT Extension Center	Larry	Malone	W.Va. Regional Health Information Technology Extension Center	info@wvrhitec.org	877-775-7535	www.wvrhitec.org	6354 U.S. Route 60, East, Suite 9		Barboursville	25504	2010	Primary care physicians, FQHCs, rural health clinics, small rural hospitals		The mission of the WVRHITEC is to promote the adoption and use of health-IT to meet the expectations for "meaningful use" and to facilitate health information exchange to enhance health care delivery and improve patient outcomes across the entire state of West Virginia. Additionally, the WVRHITEC is working to assure that "a coordinated information technology infrastructure and delivery system is established that allows patients, families, communities and the health care system to collaboratively partner to improve the health and well-being of all West Virginians."	Assist at least 1,000 primary care providers across West Virginia to use electronic health record systems in accordance with the federal government's new meaningful use standards.	EHR/HIE, EHR/Registries, EHRs, Patient Safety, Practice Transformation, Quality Improvement, Quality Measurement	Privacy and security of electronic health data and records, ICD-10	FQHC / RHC, Free Clinics, Hospital, Local Health Department, Physician offices, Public Health	Statewide		U.S. DHHS/ONC	
	Larry	Malone	West Virginia Health Improvement Institute	info@wvhiil.org	877-775-7535	www.wvhiil.org	6354 U.S. Route 60, East, Suite 9		Barboursville	25504		West Virginians	W.Va. DHHR Community Health Network of W.Va. W.Va. Regional HIT Extension Center W.Va. HIT Solutions LLC	The West Virginia Health Improvement Institute is a non-profit organization that focuses on improving the health and health care of all West Virginians. The Institute serves as a statewide collaboration among multiple stakeholders and aims to improve the health status of all West Virginians through aligned initiatives focusing on improved access, prevention, promotion of wellness and healthy lifestyle choices, appropriate utilization, and optimal evidence-based chronic illness management. The Institute, and its partners, continue to support participating practices in pursuing the "Triple Aim" of improving the health of our population, improving the healthcare experience of our patients and reducing and controlling the overall cost of healthcare.		Access to Care, Alzheimers Disease, Cardiovascular Disease, Care Coordination, Care Transitions, Communications, Diabetes, Disease Prevention, EHR/HIE, EHR/Registries, EHRs, Health Education, Health Literacy, Health Promotion, Medical Devices, Medical Homes, Obesity, Patient Family Engagement, Patient Safety, Practice Transformation, Prevention, Public Health, Quality Improvement, Quality Measurement, Research, Research, Primary, Telehealth, Wellness Programs	FQHC / RHC, Free Clinics, Medical Homes, Physician offices, Public Health	Statewide	Federal Grant	U.S. DHHS/ONC		